Sarva Shakti Yoga

Photography and Media Release Waiver

I, the undersigned, hereby grant Sarva Shakti Yoga, its representatives, and affiliates, permission to capture photographs and/or video recordings of me during classes, workshops, events, or other activities. I understand that these images and recordings may be used for promotional, educational, and marketing purposes, including but not limited to social media, websites, newsletters, and print materials, and that Sarva Shakti Yoga retains full ownership and rights to all captured content. I acknowledge that I will not receive any compensation for the use of my image or likeness and release Sarva Shakti Yoga from any claims or liabilities arising from such use.

If I prefer not to be photographed or recorded, I understand that I may opt out by notifying Sarva Shakti Yoga prior to participating in any activities. I further confirm that, in the event of opting out, Sarva Shakti Yoga will make reasonable efforts to ensure that I am not included in any photographs or recordings.

If I am under 18 years of age, I confirm that this form must be signed by my parent or legal guardian. By signing below, I confirm that I have read, understood, and agree to the terms of this waiver.

Printed Name: _____

Signature: _____ **Date:** _____

Parent/Guardian Name (if under 18): _____

Parent/Guardian Signature: _____

Date: _____

I, the undersigned, have chosen to opt out of all photography and videography at Sarva Shakti Yoga.

Printed Name: _____

Signature: _____ **Date:** _____