



# Sophia Leadership Camp for Girls



## Registration Application

### Agreement And Waiver

I understand that my child will be engaged in physical movements during the Sophia Camp for Girls. I understand my child will participate in basic yoga techniques under the supervision of a professional yoga instructor. I understand the nature of yoga and exercise and hereby assume any and all risks associated with those activities. My child has my permission to participate in The Sophia Camp for Girls. It is understood and expressly agreed to by the parent/legal guardian, to release, indemnify and hold harmless Deep Yoga & Sophia Camp and its associates from any and all liability of any kind for any damage and/or injury incurred in connection with the child's attendance in the Camp.

\_\_\_\_\_  
Parent/Guardian Signature Date

### **PHOTO/VIDEO RELEASE**

I hereby give permission for images of my child captured during The Sophia Camp for Girls through video and camera to be used for the purposes of promotional materials and waive any rights of compensation or ownership thereto.

\_\_\_\_\_  
Parent/Guardian Signature Date

### **ALLERGIES/FOOD LIMITATIONS**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### **MEDICAL CONDITIONS**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### **EMERGENCY CONTACT**

\_\_\_\_\_  
Name Relationship

\_\_\_\_\_  
Home Phone Cell Phone Work Phone E-Mail