


## 3BFIT INDY – CHILD YOGA & MINDFULNESS PROGRAM CONSENT FORM

 **Program Name:** 3BFIT Youth Yoga & Mindfulness

 **Contact:** 3bfitindy@gmail.com

 **Date of Program Participation:** \_\_\_\_\_

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### Participant Information

**Child's Full Name:** \_\_\_\_\_

**Age:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

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### Consent and Acknowledgment

I, the undersigned parent/guardian of the participant named above, give permission for my child to participate in the **3BFIT Indy Yoga & Mindfulness Program**, which includes activities such as:

- Gentle yoga postures and stretching
- Breathing exercises and guided meditation
- Mindfulness games and affirmations
- Light movement and body awareness practices

I understand that all sessions are led by trained facilitators and designed to promote emotional resilience, physical wellness, and self-confidence in a safe and supportive environment.

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### Health and Safety Acknowledgment

- I understand that yoga and mindfulness involve physical activity and movement.
- I confirm that my child is physically able to participate in the program.
- I will notify 3BFIT of any health conditions, allergies, injuries, or limitations that may affect my child's participation.
- In case of emergency, I authorize the staff to seek medical care if I cannot be reached.

Please list any health concerns or special needs:

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### **Liability Release**

I acknowledge and agree that 3BFIT Indy, its instructors, affiliates, and staff are not liable for any injury or condition that may occur during or as a result of participation in these activities. I voluntarily assume full responsibility for my child's participation and waive any claim against the organization arising from their involvement in this program.

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### **Media Release (Optional)**

- I give permission for my child's photo/video to be used in 3BFIT marketing materials or social media.
- I do **not** give permission for media use.

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### **Signature & Agreement**

I have read and fully understand this consent form and agree to the terms outlined above. My signature below confirms my voluntary consent for my child to participate in the 3BFIT Youth Yoga & Mindfulness Program.

**Parent/Guardian Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_