

# **Meditation Participation Waiver and Release of Liability**

## **Introduction**

By participating in this meditation session (the “Activity”), I acknowledge that I have voluntarily elected to take part in a guided meditation led by **Caroline Gravino** (“Facilitator”). This session involves gentle guidance focused on breathing, body awareness, and imagination techniques.

## **Assumption of Risk**

I understand that meditation is generally considered a safe activity, but like any practice, it may have physical, mental, or emotional effects. I voluntarily assume all risks associated with participating in the Activity, including but not limited to:

- Emotional discomfort or mental strain.
- Unexpected physical sensations such as dizziness or tension.
- Any unintended outcomes resulting from my personal interpretation or application of the guidance provided.

I understand that no physical contact or strenuous physical activity is involved.

## **Disclaimer of Liability**

I acknowledge and agree that the Facilitator:

1. Is not providing medical, psychological, or therapeutic services.
2. Is not responsible for any physical, mental, or emotional harm that I may experience during or after the Activity.
3. Will not diagnose, treat, or prevent any medical or psychological conditions.

## **Release of Claims**

In consideration of being allowed to participate, I agree to release and hold harmless **Caroline Gravino**, her agents, employees, or contractors from any claims, demands, or causes of action arising out of or related to my participation in the Activity.

## **Acknowledgment of Voluntary Participation**

I affirm that my participation is voluntary and that I can stop or opt out of the Activity at any time.

## **Medical and Emergency Acknowledgment**

I confirm that I am physically, mentally, and emotionally fit to participate in the Activity. I will consult a medical or mental health professional if I have any concerns about my ability to participate safely.

## **Consent and Understanding**

By signing below, I affirm that I have read and understood this waiver and release of liability. I fully agree to its terms and understand that I am waiving certain legal rights.

**Participant Information**

- Name: \_\_\_\_\_
- Signature: \_\_\_\_\_
- Date: \_\_\_\_\_

**Parent/Guardian Consent (if Participant is under 18)**

I, the undersigned, consent to the above-named minor participating in the Activity and agree to the terms outlined in this waiver.

- Parent/Guardian Name: \_\_\_\_\_
- Signature: \_\_\_\_\_
- Date: \_\_\_\_\_