



Mind Over Body
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Students First/Last Name: _____ Age: _____

I Understand and agree that these materials shall become the property of Mind Over Body Programs and will not be returned.

I hereby hold harmless, and release Mind Over Body Programs from all liability, petitions, and causes of action which I, my heirs, representative, executors, administrators, or any persons may make while acting on my behalf or on behalf of my estate.

I warrant that I am the age of consent (18 years or older) and that I am competent to contract in my own name. I have read this release before signing below and I fully understand the contents, meaning and impact of this release.

COMMENTS YOU WOULD LIKE US TO TAKE INTO CONSIDERATION::

X: _____ (Date)
(Signature) PARENT GUARDIAN

X: _____
(Print First/Last Name) PARENT GUARDIAN