

# Mindfulness in Law Society Liability Waiver

Your safety and comfort are of the utmost importance to us. We request that you participate in only those activities that you are physically, mentally, emotionally, and spiritually able to do, and that you notify us of any restrictions you may have regarding any of the Activities, and we will do our best to accommodate them. Please read the following information before signing up for a MILS Program.

## Release and Waiver

I voluntarily desire to participate in a MILS Program (“Event”). In exchange for participation in the Event and/or use of the property, facilities, and services provided during the Event, I agree to the following:

1. Voluntary Participation & Assumption of Risk. I take full and sole responsibility for my life and well-being and all decisions made before, during and after the Event. I acknowledge that I am choosing to participate voluntarily in the activities at the Event (“Activities”) and I recognize that these Activities, while planned with care and love, may contain certain inherent risks. I agree that I expressly assume the risks of the Event and all Activities in which I participate. I am also aware that if there is any Activity that I am not comfortable participating in, that I may voluntarily decline to participate if I wish.
2. Rules and Warnings. I agree to observe and obey all posted and announced rules and warnings, and further agree to follow any instructions or directions given by MILS, the Event host, or any MILS or Event host’s employees and agents during any participation in a MILS event.
3. Not a Substitute for Medical Advice. I understand that the information provided at or in conjunction with the Activities and Event is not intended to be a substitute for professional medical advice, diagnosis or treatment that can be provided by my own physician, therapist, licensed dietitian or nutritionist, or any other licensed or registered mental or physical health care professional. I understand that MILS and his/her employees, representatives, agents, and guest presenters are not acting in any capacity as a medical or mental health care provider and they are not giving medical or psychological advice. I understand that they are not providing health care, medical or nutrition therapy services or attempting to diagnose, treat or cure in any manner whatsoever any disease, condition or other physical or mental ailment of the human body during the course of the Event. Rather, they are serving in their capacities as facilitators, coaches, mentors, meditation guides, yoga and other instructors (“Facilitator”) to provide me with education, information, and tools to assist me in my own self-care and healthy living.
4. Disclosure of Allergies and Sensitivities. I understand that if I am provided with meals, snacks, or exposed to other products while at the Event, I agree to disclose to MILS in advance any known or suspected food sensitivities or other allergies. I agree to disclose any physical limitations that may impact my breathing or movement or any other health or mental

condition that may be affected during the Event. If I suspect that I have a medical or mental health emergency, issue or concern, I agree to inform MILS and his/her agents immediately.

5. Seek Medical Advice. I agree to seek the advice of my physician regarding any questions or concerns I have about my specific health situation, including but not limited to possible or actual pregnancy, known or suspected food sensitivities or allergies, dietary restrictions, or any medications I am currently taking. I understand that I am advised to speak with my own physician or mental health provider before engaging in any Activities that I learn at the Event. I agree to not disregard or delay seeking professional medical advice or stop taking any medications without speaking to my own physician or mental health care provider.
6. Imminent Harm. At any time before or during the Event, should I know or fear that I may cause imminent harm to myself, other participants, the Facilitator, or any other person, I understand and agree that I am immediately obligated to let the Facilitator know, and to remove myself from the situation in a peaceful and cooperative manner; otherwise, I consent that I may be asked to not attend the Event, leave the Event, and/or have immediate physical or mental health care administered to avoid causing mental or physical harm to myself or others.
7. COVID-19/Infections Disease. I acknowledge the CDC and public health authorities recommend I adhere to specific protocols regarding COVID-19. I agree to abide by preventative measures put in place by MILS to reduce the spread of COVID-19, which may, at its discretion, be stricter than protocols established by CDC and other public health authorities. I acknowledge, however, that MILS cannot guarantee that I will not become infected with COVID-19. I agree to observe and obey all additional posted rules and warnings regarding COVID-19 while at the Event. I acknowledge the contagious nature of the COVID-19 and that there is an inherent risk of infection or exposure to COVID-19 that exists in any public place where people are present. By attending a retreat, program, event etc. offered by MILS, in person, I voluntarily assume all risks related to exposure to COVID-19. I understand that the risk of becoming exposed to and/or infected by the Coronavirus/COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, MILS Facilitators, host site employees, teachers, agents, contractors, or volunteers, Event participants, and others, and agree to hold MILS and any Facilitators harmless for any illness or injury. I agree to follow all MILS and Event host COVID-19 protocols before and during the Event.
8. Consent to First-Aid or Emergency Treatment. I acknowledge that MILS and the Event Facilitators are not expected to provide medical and/or psychological care. I agree and consent that in the event I have a medical or psychological emergency, MILS and any Facilitator has the authority and discretion to contact emergency services. I agree to hold MILS and any Facilitator harmless as a result of any such injury or damage I may suffer due to the application of medical or mental health services or treatment.
9. Limitation of Liability. I waive and release MILS and any Facilitator from any and all liability, damages, causes of action, allegations, suits, sums of money, claims and demands whatsoever, in law or equity, which I have ever had, now have or may have in the future against MILS and any Facilitator, arising from my past or future participation in, or otherwise with respect to, anything related to and including the Activities and Event, including any

transportation to, from and during the Event, unless arising from the gross negligence of MILS or any Facilitator.

10. Release of Claims. In no event will MILS or any Facilitator of the Event be liable to me or to any person for any direct, indirect, special, incidental or consequential damages for any use of, non-use, or reliance on this Event or Activity, its information, programs and/or services, including, without limitation, personal injuries, accidents, misapplication of information, or any other loss, malady, disease, difficulty, injury, or otherwise, even if I am advised of the possibility of such damages, difficulties, or injuries, whether caused by the fault of myself, the Facilitator, other attendees or other third parties. I agree to pay for all damages to the facilities caused by any negligent, reckless, or willful action that I may take.
11. Severability. If any provision of this Liability Waiver is invalid or unenforceable, the remaining provisions remain in full force and effect.

I have carefully read this document and I consent to all parts of it. I understand that by signing up for this Event, I agree to this Event Waiver and voluntarily surrender certain legal rights.