State of Nirvana Waiver and Release of Liability

Participant Information:

- Full Name: _____
- Address: _____
- Phone Number: _____
- Email: _____
- Emergency Contact Name: _____
- Emergency Contact Phone Number: _____

Acknowledgment and Assumption of Risks:

I, the undersigned, acknowledge and understand that participation in the wood-fired sauna and ice bath sessions (the "Activities") offered by State of Nirvana at the Beach Bar Cafe involves inherent risks, which may include, but are not limited to:

1. **Heat-Related Risks**: Burns, heat exhaustion, heat stroke, dehydration, and other heat-related illnesses.
2. **Cold-Related Risks**: Hypothermia, frostbite, shock, and other cold-related illnesses.
3. **Physical Injuries**: Slips, trips, falls, muscle strains, sprains, fractures, and other physical injuries.
4. **Medical Conditions**: Exacerbation of pre-existing medical conditions, heart attack, stroke, respiratory issues, and other serious health risks.
5. **Environmental Factors**: Insect bites, allergic reactions, and adverse weather conditions.
6. **Emotional and Psychological Risks**: Anxiety, panic attacks, and other emotional or psychological effects.

I acknowledge that these risks can result in serious injury, permanent disability, and even death. I voluntarily choose to participate in the Activities, fully accepting and assuming these risks.

Health Declaration:

I declare that I am in good health and do not suffer from any condition that would prevent me from safely participating in the Activities. I agree to inform “State of Nirvana” of any medical conditions, medications, allergies, or other factors that may affect my ability to safely participate. I acknowledge that it is my responsibility to consult with a healthcare professional regarding my participation if necessary.

Release and Waiver of Liability:

In consideration of being allowed to participate in the Activities, I hereby release, waive, discharge, and covenant not to sue State of Nirvana, the Beach Bar Cafe, their owners, directors, officers, employees, agents, volunteers, and representatives from any and all liability,

claims, demands, actions, or causes of action arising out of or related to any loss, damage, or injury, including death, that may be sustained by me or my property, whether caused by the negligence of the Releasees or otherwise, while participating in the Activities or in any activities related thereto.

Indemnification:

I agree to indemnify and hold harmless the Releasees from any and all costs, expenses, damages, and liabilities, including attorney's fees, that may arise out of or result from my participation in the Activities. This includes, but is not limited to, any claims made by other individuals or entities as a result of my actions during the Activities.

Consent to Medical Treatment:

I consent to receive medical treatment deemed necessary if I am injured or require medical attention during my participation. I understand that I am solely responsible for all costs related to such medical treatment, medical transportation, and/or evacuation.

Photography and Media Release:

I grant permission to State of Nirvana and the Beach Bar Cafe to use photographs, videos, and other media taken during the Activities for promotional purposes, including but not limited to, social media, websites, and marketing materials. I understand that I will not receive any compensation for such use.

Severability:

If any provision of this waiver is found to be unenforceable or invalid, that provision shall be severed from this waiver, and the remainder of the waiver shall be enforceable and valid.

Acknowledgment of Understanding:

I have read and understand this Waiver and Release of Liability and fully understand its terms. I understand that I am giving up substantial rights by signing it and sign it freely and voluntarily without any inducement.

Signature:

Participant's Signature: _____ Date: _____

Printed Name: _____