

# Healing From the Body Retreat Cancellation Policy

**Dates: Friday, May 19 to May 22, 2023**

**Location: India Rocks Beach, Florida**

**A non-refundable deposit of \$299 is required to hold your reservation.**

**Cancellation prior to January 1st, 2023** guest receives a full refund of payments made.

**Cancellation prior to February 1st, 2023:** guest receives a 50% refund of the retreat balance paid.

**Cancellation after March 1st, 2023:** no refunds will be given.

\*\*\*FULL Balance is due to Full Collective by March 1st, 2023\*\*\*

There will be no refunds or discounts for arriving late or leaving early. There are no exceptions to the above cancellation policies including personal injuries or weather.

Full Collective LLC will not be held responsible for any additional travel expenses incurred in preparation for canceled retreats including airline tickets, travel delays, flight cancellations, or illness. All guests must sign all policy, term, and liability forms prior to making a payment plan or making the full payment for the retreat. If this form is not signed prior to arrival you will not be allowed to participate in the retreat and no refund will be made. After March 1st, 2023 the retreat payments are non-refundable. If payment is not made on time, you forfeit your spot in this retreat. If for any reason you cannot attend this retreat, you can transfer your registration to another person and they can attend the retreat - and this will be your responsibility to find a replacement. Thank you for understanding and respecting the cancellation policy.

Please print and sign your name below if you understand and agree with everything written above:

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

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

# Healing From the Body Retreat Release of Liability and Assumption of Risk

I, (print name) \_\_\_\_\_, hereby fully waive and release Pricelis Perreaux-Dominguez of Full Collective LLC and Kristen LaValley, from any and all claims for personal injury that may result from my participation in the Healing From the Body Retreat I hereby voluntarily, at my own risk, sign this Waiver and Assumption of Risk in sole consideration of being permitted to attend the Healing From the Body Retreat in Florida. I hereby agree to abide by all rules, instructions, policies, and procedures imposed by the Release relating to the use of the facilities or property during this retreat.

By signing this Waiver and Assumption of Risk, I fully agree to indemnify and hold harmless the Release, its employees, agents, from and against any and all liability incurred as a result of or in any manner related to my participation in this retreat. This includes Pricelis Perreaux-Dominguez the FULL Collective founder, Kristen LaValley, and all staff that I meet during the retreat which will include driver, chef, tour guides, boat drivers, and housekeeping. I hereby certify that I am of legal age and competent to execute this Waiver and Assumption of Risk, that in doing so of my own free will and accord, voluntarily and without duress, and that I do so intending to bind myself, my executor, my heirs, and administrators or assigns to the fullest extent. I have read and understood the foregoing, and acknowledge my consent to the terms of this Waiver & Assumption of Risk by signing this Waiver. This retreat involves sharing content and ideas with other women at the retreat - by signing below, you agree to not use any content or ideas that were not your own or approved by another fellow attendee without their permission. You also agree, by signing below, to not sell any content or ideas shared during the retreat to any outside sources, companies, or people. All attendees are required to take a COVID-19 test within 48 hours of the start of the retreat and the results will be shared with the retreat host. If the attendee gets a positive COVID-19 test result, the client agrees to not attend the retreat and understands no refunds will be given. If an attendee gets COVID during the retreat the attendee can no longer stay at the retreat and there is no liability against Full Collective or Pricelis Perreaux-Dominguez or Kristen LaValley. Full Collective, Kristen LaValley, Pricelis Perreaux-Domingue will not be responsible for any medical bills or coverage in relation to the retreat attendee and COVID-19. By signing below you recognize and agree with all the words, conditions, and terms written above.

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

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

# Healing From the Body Retreat

## Liability Waiver

I, (print name) \_\_\_\_\_, hereby agree to the following:

1. That I am participating in the Healing From the Body Retreat offered by Pricelis Perreux-Dominguez, Kristen LaValley, and Full Collective LLC. 2. I recognize that this retreat will include excursions around water, boats, and nature, and I am fully aware of the risks and hazards involved. 3. I understand that it is my responsibility to obtain travel insurance. 4. I represent and warrant that I am physically fit and I have no medical conditions that I have not already disclosed to Pricelis Perreux-Dominguez and Kristen LaValley that would prevent my full participation in the retreat. 5. In consideration of being permitted to participate in the retreat, I agree to assume full responsibility for any risks, injuries or damages, known or unknown, which I might incur as a result of participating in the retreat, including any and all activities done with the retreat group, or as an individual at this retreat. 7. In further consideration of being permitted to participate in the Retreat, I knowingly, voluntarily and expressly waive any claim I may have against Full Collective, Pricelis Perreux-Dominguez and Kristen LaValley and Airbnb and its staff for injury or damages that I may sustain as a result of participating in the retreat. 8. I, my heirs and legal representatives forever release, waive, discharge and covenant not to sue Full Collective LLC, Pricelis Perreux-Dominguez, Kristen LaValley and Airbnb, and its staff for any injury or other acts. 9. I hereby authorize Full Collective LLC, Pricelis Perreux-Dominguez to publish photographs taken of me on during the retreat and my name and likeness for use in Full Collective print, online, and video-based marketing materials, as well as other Company publications. I hereby release and hold harmless Pricelis Perreux-Dominguez, Kristen LaValley and Full Collective LLC from any reasonable expectation of privacy or confidentiality associated with the images specified above. I further acknowledge that my participation is voluntary and that I will not receive financial compensation of any type associated with the taking or publication of these photographs or participation in company marketing materials or other Company publications. I acknowledge and agree that the publication of said photos confers no rights of ownership or royalties whatsoever. I hereby release Pricelis Perreux-Dominguez, Kristen LaValley, Full Collective LLC, its contractors, its employees, and any third parties involved in the creation or publication of marketing materials, from liability for any claims by me or any third party in connection with my participation. 10. I understand that Full Collective LLC, Pricelis Perreux-Dominguez, Kristen LaValley, home, and its staff take no responsibility or liability for, and the Retreat Participant expressly waives any right to hold the above liable for: 1. any changes or delays in air schedules, missed airline or other carrier connections, or other services; 2. injury, loss, or damage to persons or property, including luggage; 3. additional expenses resulting from changes in exchange rates, tariffs, or schedule; 4. defect in any vehicle or the act or default of any company or person engaged in conveying the Retreat Participants, or in carrying out the arrangements of the Retreat, or otherwise; 5. additional expenses incurred or due to sudden sickness, weather conditions, strikes, or other causes or acts of God; 6. losses due to cancellations.

Date: \_\_\_\_\_ Name: \_\_\_\_\_

Signature: \_\_\_\_\_

# Emergency Release Form

In the event of an emergency, please contact the following person(s) in the order presented:

Emergency Contact \_\_\_\_\_

Relationship \_\_\_\_\_

Contact Telephone \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Relationship \_\_\_\_\_

Contact Telephone \_\_\_\_\_

I, \_\_\_\_\_, verify that you can contact the persons above if an emergency relating to me presents itself during The Healing From the Body Retreat in Florida.

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

Name: \_\_\_\_\_

Signature: \_\_\_\_\_