



Sankofa Healing Experience Liability Waiver & Agreement

Acknowledgment & Assumption of Risk

I acknowledge that I have voluntarily chosen to participate in the **Sankofa Healing Experience**, a gathering designed for connection, healing, and transformation. I understand that this experience may include activities such as meditation, movement, breathwork, sound healing, plant-based ceremonies, and other healing modalities, all of which are intended to support emotional, physical, and spiritual well-being.

I recognize that healing experiences can bring up deep emotions and require personal responsibility for my own well-being. I understand that **I am solely responsible for my physical, emotional, and mental health throughout this experience** and that participation in any activity is voluntary. If at any time I feel discomfort or choose not to participate, I have the right to step away and honor my own boundaries.

Release of Liability

By submitting this form, I acknowledge that **Sankofa Healing Experience, its organizers, facilitators, staff, volunteers, venue hosts, and affiliates (hereinafter referred to as “the Released Parties”)** are not responsible for any injuries, emotional distress, accidents, loss, or damage that may occur before, during, or after the event.

I voluntarily **release, waive, and discharge** the Released Parties from any and all claims of liability, including but not limited to physical injury, emotional distress, property damage, or any unforeseen circumstances related to my participation in this experience.

I understand that **the Sankofa Healing Experience is not a substitute for medical, psychological, or therapeutic care.** If I have any medical conditions, I have consulted with a licensed healthcare provider before participating.

Code of Conduct & Personal Responsibility

I understand that this is a sacred and intentional space for healing and transformation. I agree to:

- Show up **open to connect, heal, and transform** in community with others.
- Respect the confidentiality, privacy, and personal boundaries of other participants.
- Abstain from disruptive behavior, violence, or any actions that may harm others or the space.
- Take full responsibility for my emotions, reactions, and well-being during this experience.

I understand that **failure to adhere to these agreements may result in being asked to leave the experience without a refund.**

Media Release (Optional)

I grant permission for photographs, video, or audio recordings taken during the Sankofa Healing Experience to be used for promotional or educational purposes by the organizers. I understand that I may opt out of any recordings at any time.

Agreement & Signature

By submitting this form, I acknowledge that I have carefully read, understand, and voluntarily agree to this waiver and the terms outlined above. I affirm that I am participating of my own free will and take full responsibility for my experience.