

breath body yoga

BAPTISTE POWER VINYASA YOGA
AFFILIATE STUDIO

NEW STUDENT REGISTRATION

STUDENTS NAME

STUDENTS E-MAIL

MAILING ADDRESS

CITY

ST.

ZIP

CONTACT PHONE

HAVE YOU PRACTICED YOGA BEFORE, IF SO EXPLAIN?

DO YOU HAVE ANY INJURIES, IF SO EXPLAIN?

HOW DID YOU HEAR ABOUT BREATH AND BODY YOGA?

PLEASE ADD MY NAME TO THE

MAILING LIST

E-MAIL LIST

OCCUPATION

BIRTHDAY

In consideration of my enrollment at Breath and Body Yoga I agree to the following:

1. I have been examined by a licensed physician within the past six months and have been found to be in good physical condition and fully able to exercise without risk of injury or impairment.
2. I have previously describe any and all physical conditions, medications, and any factor that may impact my ability to perform the exercises taught at Breath and Body Yoga.
3. I agree to assume full responsibility for any risk, injuries, or damages that may occur as a result of my participation of any activity at Breath and Body Yoga. I also agree to indemnify and hold harmless any employee, owner, or associate of Breath and Body Yoga in the event of injury, physical or otherwise, and fully understand the risks associated with practicing any physical exercise.
4. I agree to faithfully follow the instructions provided to me by Breath and Body Yoga and further agree to follow all posted rules and regulations. I understand that any deviation from the instruction provided to me from Breath and Body Yoga represents my taking an unnecessary risk and disturbs and distracts other students. I understand that I may be dismissed from class in the event that any disturbance is perceived by Breath and Body Yoga, and that any refund of fees paid for class is within the discretion of Breath and Body Yoga.

SIGN



DATE