

Registration Form:

Restorative Yoga

December 9, 2007

13h00-16h00

Kelly Mcgrath

Name:	_____	
Street Address:	_____	
City: _____	Province: _____	Country:

Postal Code: _____	Home Phone:	

Work Phone: _____	Email:	

Fees: please check the appropriate box

\$50.00 paid by December 1, 2007

\$60.00 paid after December 1, 2007

Total Fee: _____ **Date pf payment:**

Method of Payment

Cash Cheque Visa Master Card Debit

*All prices are in Canadian Dollars. You will receive confirmation by email.
Receipts will be available to pick at the workshop.*

Credit Card Information

Please print clearly

Credit Card number: _____

Expiry date: _____ **Name on Card:**

Signature: _____ **Date:**

Cancellation Policy

A \$20.00 administration fee is non-refundable and non-transferable. The remainder is refundable up to one week before your workshop date.

Agreement

Yoga is educational and each student is responsible for his or her own health, safety and well being while participating. I, the undersigned yoga student, acknowledge the inherent risks associated with yoga, and accept those risks freely into the workshop of my own decision. I the undersigned yoga student, agree to hold the Joy of Yoga Studio, it's faculty and staff free from any and all responsibility for any injury, whether physical or mental, arising out of the attendance of the workshop, associated excersises and following of any printed literature and use of premises.

Signature of yoga student:

Date: _____

Please mail or drop off registration form to:

Joy of Yoga Studio
460 Ste. Catherine O, suite 403
Montreal, Quebec
Canada
H3b1A7