

REGISTRATION FORM

Fill out *what is applicable* if:

- You are a new student
- You are registering for beginning hatha class
- You are registering for a workshop or extended study

Name _____ Home Phone _____

Address _____ Work Phone _____

City _____ State _____ Zip Code _____

E-Mail Address _____

New Student _____ Add me to the email list _____ Add me to the mailing list _____

Registering for (Beg Hatha, Name of Workshop, Name of Study) _____

Amount Paid _____ Check # _____ MC/V _____

Payment is due prior to first class or day of workshop. \$30 cancellation fee.
We accept cash, checks, Master Card and Visa. You may pay in person, by mail, or by phone with a credit card.

Yoga North
4628 Pitt St Suite 208
Duluth MN 55804
218-722-YOGA
888-722-YOGA
www.yoganorthduluth.com

Waiver: I understand the activity I am planning to undertake is entirely voluntary. I release Yoga North Studio and all instructors and staff from any liability in event of injury. I understand it is solely my responsibility to disclose any prior existing health conditions. It is my responsibility to discuss exercise with my physician. I have read the studio's policies.

SIGNATURE _____ DATE _____