STUDENT REGISTRATION & RELEASE

the yoga project

We respect our student's privacy. We won't share your information with anyone else.

Name _____ **Phone** _____

Address

_____

City _____ **State** _____ **Zip** _____

Email (PLEASE PRINT CAREFULLY)

Yoga for the Larger Woman: (Please mark which class you are registering for.)

□ Sunday, 4:15–5:30 pm
□ Monday, 7–8:15 pm
□ Tuesday 7-8:15 pm
□ Friday 10-11:15 am
□ Saturday 11–12:15 pm
□ Getting You Started [two-hour introductory workshop].

I am enclosing a check for $_____. I paid by Pay Pal $_____ payment date _____.

How did you hear about us? (Please let us know how you found us. This will help us to learn what's the best way to spread the word. Thank you.)

□ The Bee; The Oregonian
□ Internet
□ LW website; □ TYP website; □ Other website, what?_____
□ Flier or Banner at Grand Central Bakery;
□ Life Balance; □ OHSU; □ Providence
□ Friend's referral, who? _____
□ Other, what? _____

RELEASE OF LIABILITY

I understand that yoga, like any physically challenging exercise program, is not free from the risk of injury and I assume full responsibility for myself while at The Yoga Project (TYP). I understand that TYP will not provide any medical services or diagnoses of any condition that I may have and that if I have any medical concern I will consult my personal physician or other competent medical provider.

I agree that I will not hold TYP, its teachers, owners or others associated with it liable for any claim of any kind for any injury that might result from or be related to my use of TYP facilities or my participation in any TYP class, workshop or other program.

I acknowledge that I've read and understood this waiver of liability and that I agree to it.

Date _____ **Signature of Student** _____