



Package: \_\_\_\_\_

Payment: \_\_\_\_\_

Date: \_\_\_\_\_

Class Taken: \_\_\_\_\_

## **BIKRAM YOGA DELTA REGISTRATION AND WAIVER FORM**

**\*\*\*Please PRINT Clearly\*\*\***

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

PHONE: HOME: \_\_\_\_\_ CELL: \_\_\_\_\_ Provider to receive text alerts: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

POSTAL CODE: \_\_\_\_\_ BIRTHDAY (MM/DD/YYYY): \_\_\_\_ / \_\_\_\_ / \_\_\_\_

EMAIL: \_\_\_\_\_ GENDER:  Male  Female

**\*\*All studio communications are done through e-mail including CLASS CANCELLATIONS, schedule changes, studio updates, helpful tips and studio newsletter. It is in your best interest for you to provide a current e-mail address. We do not share e-mail addresses with any third parties. Your privacy will be respected. \*\***

How did you hear about us? \_\_\_\_\_ id: \_\_\_\_\_ *(Please print friend's name & Member ID #)*

Physical/Health Ailments/Injuries: \_\_\_\_\_

### **PLEASE READ THE FOLLOWING CAREFULLY**

In consideration of and as an inducement to you enrolling me as a student of Bikram Yoga Delta/ Bikram's Yoga College of India I represent and agree as follows:

1. I have been examined by a licensed physician within the past six months and have been found by such physician to be in good physical health and fully able to perform all Yoga exercises which I am to learn and perform during my enrollment with you.
2. I will faithfully follow all instructions given me by you and your instructors as to when, where, and how to perform and not to perform Yoga exercises, it being understood that any deviation by me from such instructions shall be at my own risk.
3. I will not hold you, your partners, instructors, or employees responsible for any injuries suffered by me caused whole or in part by my failure to faithfully follow instructions of your or your instructors or by any physical impairment of mine not fully disclosed to you in writing.
4. I understand and acknowledge that I am to receive instruction in Yoga theory and exercises only, and I will not hold you, your partners, instructors, or employees to any higher standard of care than that applicable to school of Yoga theory and exercises.
5. The tuition paid herewith and such registration fees paid hereafter are non-refundable; such refunds if any, as are made shall be entirely within the discretion of Bikram Yoga Delta/Yoga College of India.
6. I agree to have my photo taken for purely identification purposes only.

Signature: _____	Date: _____
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**Students may lie down at any time during class but must stay in the room for the duration of class so as not to disturb others' practices and so that the instructor may keep an eye on you at all times.**

***Bikram Yoga Delta is not responsible for lost or stolen items.***

**Whining and complaining are discouraged, but fortunately not part of the official Waiver items listed above!**