



YOGA LEARNING ADVENTURES

GENTLE YOGA + DEEP RELAXATION REGISTRATION FORM

Stressed out? On overload? This is the workshop for you! Learn techniques that you can also use at home to move and relax with ease. Lots of options and modifications will be offered to meet your individual needs. Includes handouts, an aromatherapy roller, and assistance in creating routines for home.
No experience necessary.

Tuesdays, 5:15-7:15pm

February 19
March 12
April 30
May 7
May 21

\$25 each

Buy more & save!

2 for \$45--\$5 off
3 for \$65--\$10 off
4 for \$85--\$15 off
5 for \$105--\$20 off

Name _____ Session Attending _____

Address (street, city, & zip) _____

Email _____ Cell Phone _____

What is your motivation for attending this workshop?

Do you have an exercise routine? If yes, please describe. _____

Do you have any yoga experience? If yes, how long & how often? Where do you practice? What style of yoga?

Do you have any meditation experience? If yes, how long & how often? Where do you practice? What style of meditation?

Do you have any formal yoga or meditation training, such as a teacher training or certification program?

List any limitations, health issues, allergies, or injuries that you feel I should know as your yoga teacher. This information will help me to make the experience more comfortable for you.

Emergency Contact, available during workshop:

Name _____ Phone _____ Relationship To You _____

TO REGISTER

1. Complete registration form. Access the printable form on the website or come early to first class.
2. E-mail completed form to angie@yogalearningadventures.com, drop off in an envelope the Kellar office, or mail to address below.
3. Cash, check, or online credit card payments are accepted. Make checks payable to *Yoga Learning Adventures*.

ANGIE SWEARINGIAN
KELLAR SCHOOL
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PEORIA, IL 61614

WAIVER AND RELEASE

I recognize and acknowledge that there are certain risks of physical injury and I agree to assume the full risk of any injuries, including death, damages, or loss which I may sustain as a result of participating in this workshop. I agree to waive and relinquish all claims I may have as a result of participating in this workshop against Yoga Learning Adventures LLC, Angie Swearingian, and Tapas Yoga Shala. I do hereby fully release and discharge Yoga Learning Adventures LLC, Angie Swearingian, and Tapas Yoga Shala from any and all claims from injuries, including death, damage, or loss which I may have, or accrue to myself on account of participation in this workshop. I further agree to indemnify and hold harmless and defend Yoga Learning Adventures LLC, Angie Swearingian, and Tapas Yoga Shala from any and all claims resulting from injuries, including death, damages, and losses sustained by me and arising out of, connected with, or in any way associated with activities of this workshop. In case of an accident or sickness, I consent to emergency medical care provided by ambulance or hospital personnel.

I have read the above Liability Waiver and fully understand the contents. I voluntarily agree to the terms and conditions stated above.

Signature _____

Printed Name _____ Date _____