

## *Kids Yoga Registration Form School Holiday Activities 2010*

Name		
Parent		
Address		
Suburb		Post Code
Phone		Birth Date
School		Age & Year level
Email		
	Receive emails class info, newsletters, photos. Yes No	
Medical conditions, allergies or injuries		
Main benefit & intention	Relaxation Posture awareness Self awareness respect / self love	Improved strength/ Flexibility/ coordination Improved Concentration
Course	School Holiday Yoga and Art activity (\$30 per child, \$20 per extra child)	
Activity Date		
Payment	Credit card / cheque / cash / direct bank deposit	
Card no#		
Card exp	Rec# req Yes No	
Bank details	Acct name: C S Adams, BSB: 704-230, Acct no: 100236151, Bank: Police credit co-op. Ref: KY + student/s name.	
Amount	Deposit/full payment	
Signature	Date	
Deposit	A \$30 non-refundable deposit secures your booking.	
Refunds/ Deferment	Are not available once a course has commenced unless students are unable to complete due to accident of illness. Teacher approval required to defer to another term.	

Please post registration & payment to: Ms C.S Adams,  
7 Beecham Rd, MT CLAREMONT, 6010



### *Kids Yo YO Yoga & Yoga In-Tuition*

w: [www.modalitymassage.com/YogaInTuition.html](http://www.modalitymassage.com/YogaInTuition.html)

t: 0423 755 250 e: [cami.sahaja@gmail.com](mailto:cami.sahaja@gmail.com)

A.B.N: 60758295511