

BIKRAM YOGA PRAHRAN REGISTRATION



FIRST NAME _____ FAMILY NAME _____

EMAIL _____ DATE OF BIRTH _____

ADDRESS: NUMBER _____ STREET _____

SUBURB _____ POSTCODE _____ STATE _____

HOME/MOBILE PHONE _____

EMERGENCY CONTACT (NAME & PHONE) _____

INJURIES _____

PREGNANT? YES NO

BREASTFEEDING? YES NO

As a condition of my membership and/or participation in yoga classes/events at Bikram Yoga Prahran, Level 1, 236 High Street Prahran, I acknowledge and agree to the following (Please tick all boxes as agreement and acknowledgement).

- I have been examined by a licensed physician 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 class/session/membership with you.
- I will faithfully follow all instructions given to me by you and/or your instructors as to when, where and how to perform and not perform yoga exercises, it being understood that any deviation by me from such instructions shall be at my own risk.
- I will not hold you, your partners, or employees responsible for any injuries suffered by me caused whole or in part by my failure to faithfully follow instructions of your instructors or by any physical impairment of mine not fully disclosed to you in writing.
- 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 or care than that applicable to a school of yoga theory and exercises.
- I have read and agree to the terms and conditions of my purchased pass as outlined at www.bikramyogaprahran.com.au. The tuition paid herewith and such registration fees paid hereafter or directly online are non-refundable; such refunds if any, as are made, shall be entirely at the discretion of Bikram Yoga Prahran.

DATE _____

SIGNATURE _____