

# YOGA Registration Form

[www.fountainofyouthyoga.net](http://www.fountainofyouthyoga.net) 713-598-5579

PARTICIPANTS NAME \_\_\_\_\_ AGE \_\_\_\_\_ GRADE \_\_\_\_\_

SCHOOL NAME \_\_\_\_\_ TEACHER \_\_\_\_\_

GUARDIAN NAME \_\_\_\_\_ EMAIL \_\_\_\_\_

GUARDIAN CELL: \_\_\_\_\_ WORK: \_\_\_\_\_

EMERGENCY CONTACT NAME : \_\_\_\_\_ PHONE \_\_\_\_\_

Adult picking up child 5min.early? \_\_\_\_\_ Staying Extended Day **Yes / No**

Yes, I would like to sponsor a child in need to participate in Yoga. You will receive an email confirmation. Please circle one. **Fall Spring Monthly Full Year** \*Call for more information

**Semester Fees & Registration Fees vary depending on your School. Find your School Online.** No Refunds. Checks Payable to: Sharon D'Amico

You may pay In Full up front OR Yoga Fees can be divided into **2** payments. **1<sup>st</sup>** payment due Before or On the first class. **2<sup>nd</sup> payment due 4 weeks later.** Please call if you need assistance or have questions about payments.

Enter the amount, if you are paying in Full or Half and the date 2<sup>nd</sup> payment will be due. Circle your 2 choices: I agree to pay the amount of \$\_\_\_\_\_ for class fees with Pay Pal/ Cash/ Checks/ In Full / Divide Two Payments. **2<sup>nd</sup> payment Due:** \_\_\_\_\_

Occasionally, photos are taken of the class and could be used on our website or in fliers. May we take photos of your child participating in class? **YES** or **NO**.

*While we take every necessary precaution to ensure the safety of your child while teaching Yoga at your school, church or summer program, Sharon D'Amico, her assistants, coaches, volunteers and the school is not responsible for any injury or accident occurring as a result of regular class participation. I understand and I agree to all school, church, and summer program policies and I give permission for my child to participate in Yoga class. **I agree to arrive 5 minutes** early to ensure I pick up my child on time so that the teachers will be safe and on time driving to their next class at another location.*

**Parent/Guardian Signature**

**Date**

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