

Zooga Yoga South Bay Adult Registration Form

Today's Date:	-		
Full Name:			
Date of Birth:	_		
Address:		Apt	
City: Stat	e:	_ Zip Code:	
Mobile:	Home: _		
Work:			
Email:		Twitter @	
Emergency Contact Name and Number:			
Please list all known allergies, physical limitations, concerns and goals:			
How did you hear about us?			
Class	Package	Drop-in	

Liability Disclaimer & Notices: Please read carefully.

I hereby acknowledge the following notices and grant to **Zooga Yoga South Bay** the following release from liability:

**A.** I acknowledge and fully understand that I will be engaging in physical activities that may involve some risk of injury. I acknowledge and have been advised that it is my responsibility to consult with my physician with respect to any past or present injury, illness, health problem or any other condition or medication that may affect my participation. I assume the foregoing risks and accept full personal responsibility for any personal injuries sustained which might incur as a result or participating in this program and discharge and hold harmless Zooga Yoga South Bay, its owners, directors, members, employees and agents from any claim, cause of action or liability for damages arising from any personal injury to myself or other persons or property caused by myself or my participation in the Zooga Yoga South Bay program.

**B.** I clearly understand that cancellations are to be made before the third attended class in order to receive a prorated refund. I agree and understand that there is a \$40 processing fee for all refunds and that I will not receive any refund or credit for attended classes.

C. I agree that I will not attend class if ill. Please be mindful of the others.

**D.** I AGREE to give Zooga Yoga South Bay permission to put me on the mailing list and to use photographs and/or videas of myself for any Zooga Yoga South Bay promotional materials. I understand that I will not be identified by name, nor will any compensation be extended for such use.

Signature (over 18 years of age) \_\_\_\_\_