

BIKRAM YOGA GRASS VALLEY/NEVADA CITY  
REGISTRATION CARD

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ M.I. \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_ (We do not sell e-mail addresses but will send holiday schedules & special offers)

Cell Phone (\_\_\_\_) \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_

Date of Birth \_\_\_\_\_ (If you provide your e-mail address and birthday, you will receive a free class for your birthday!)

Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Any injuries or medical conditions we should be aware of? \_\_\_\_\_

Referred by: Friend (name: \_\_\_\_\_) Ad Brochure Newspaper Street Sign Yellow Pages Internet (circle one)

Other sports activities \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

In consideration of and as inducement to enrolling as a student of The Yoga College of India – Grass Valley/Nevada City, 900 Golden Gate Terrace, Grass Valley, CA 95945, I represent and agree to the following, by **initialing each point**:

\_\_\_\_\_ I am over 18 years old and if not, I will be accompanied by a parent or legal guardian for my first three classes at Bikram Yoga Grass Valley/Nevada City.

\_\_\_\_\_ I have read and agree to follow the Class Guidelines. I know I will be doing yoga in a heated room and if I feel tired or dizzy during class or want to take a break, I will sit down.

\_\_\_\_\_ I am well hydrated prior to class. I understand there are designated water breaks during class and will drink water when the water breaks are announced.

\_\_\_\_\_ I have eaten a meal at the last regular meal time **but not three hours prior to class**, I am not fasting, and if I am hungry I will drink (or have drank) some juice prior to class.

\_\_\_\_\_ I am wearing appropriate clothing to do yoga in a heated room and have left my valuables at home.

\_\_\_\_\_ I have not taken recreational drugs or consumed alcoholic beverages today.

\_\_\_\_\_ I have listed all medical conditions on my registration card.

\_\_\_\_\_ I have been examined by a licensed physician within the past six months 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 enrollment at Bikram Yoga Grass Valley/Nevada City.

\_\_\_\_\_ I will faithfully follow all instructions given to me by the instructors as to when, where, and how to perform and not to perform Yoga exercises, it being understood that any deviation by me from such instructions is not recommended and shall be at my own risk.

\_\_\_\_\_ I will not hold Bikram Yoga Grass Valley/Nevada City or its instructors, or employees responsible for any injuries suffered by me caused whole or in part by my failure to faithfully follow instructions or by any physical impairment of mine.

\_\_\_\_\_ I understand and acknowledge that I am to receive instruction in Yoga theory and exercises only, and I will not hold Bikram Yoga Grass Valley/Nevada City, its instructors, or employees to any higher standard of care than that applicable to school of Yoga theory and exercises.

\_\_\_\_\_ I understand I am entitled to a one-time 20% discount off any class card or package (including an annual pass!) if the purchase is made prior to the expiration date of my introductory 10 day pass. I also understand that the tuition paid herewith and such registration fees paid hereafter are non-refundable and non transferable.

\_\_\_\_\_ **Bikram Yoga Grass Valley/Nevada City reserves the right to refuse admission of any person to its yoga classes when it is determined that such admission may adversely affect the class or the other students. Thank you for your understanding.**

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Must be signed by Parent or Guardian if under 18 years old.