

Enrolment Form



I would like to enrol in the following classes:

Monday evening:

6.45pm - 8.00pm Level 1 yoga (Please tick)

Tuesday evening:

1.15pm - 2.30pm Level 1 yoga (Please tick)

7.15pm - 8.30pm Level 1 yoga (Please tick)

Your details

Firstname: Surname:

Address:

..... Postcode:

Email: Telephone:

Emergency contact number :

Fees enclosed

Please TICK one

£30.00 4 weeks reserve / **£25.00** concession rate

All personal information will not be shared or sold and will be for the sole use of Santosha yoga. I give permission to Santosha yoga to use photographs obtained during classes, workshops and events to use as part of a public display which may include Santosha yoga website and other print publications.

I understand that I participate in all yoga classes entirely at my own risk and any loss, damage, injury or any other mishap will not be the responsibility of the class organiser or teacher. I understand that refunds will be only be given if the course / class I want is booked. Policy Santoshayoga

Signed: Date:

Thankyou for completing this form

The information supplied on this form is in the strictest of confidence and subject to the constraints of the Data Protection Act 1998