



YOGA LIFE, MIND & BODY CENTRE

Registration Form

Registration / Membership No : - -

Name as per MyKad :

Other Name :

Contact No (Land Line/Mobile) :

Email Address :

Line of Work :

Health Problems (if any) :

Blood Pressure (tick where applicable) : Normal High Low Don't know

Other Concerns :

In case of Emergency, kindly contact the following person :-

Name :

Relationship : Contact No (Land Line/Mobile) :

Disclaimer :

I understand that by signing this statement I am agreeing not to hold any staff or member of Yoga Life, Mind & Body Centre responsible or liable for any injury or discomfort if any, that I may suffer directly or indirectly as a result of participation in any of the school's classes and programmes. I also confirm receipt, have read and undertake to adhere to the Rules and Regulations of the Centre as stated overleaf.

Signature

Date

For Office Use Only

Registration/Membership Fee : RM (ONE time only)

Package (see below) : RM Attendance Card No :

Others / Purchases : RM

TOTAL Due RM

Initial / Date / Time

Collected by (Name) :

Package

Level Basic Int 1 Int 2 Adv No of Classes 4x 8x 12x 16x UL Validity 1 mth 2 mths

Remarks (if any):

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