



Rose Yoga
OF ASHLAND

Workshop Registration

Pre-registration and payment is required to reserve your spot in the class.

Name _____

Date _____

Email _____

Phone _____

Which workshop are you registering for? _____

Please complete form below if this is your first time at Rose Yoga, and enclose a check or money order made payable to **“Rose Yoga Center.”** Send this form and payment to:
685 A Street, Ashland, OR 97520

New Student Form	Waiver of Liability/Informed Consent
Name _____	<p>I, _____ have enrolled in a program of strenuous physical activity including but not limited to various yoga and meditation exercises offered at Rose Yoga Center. I understand that it is my responsibility to consult with a physician prior to and regarding my participation in any yoga class or workshop. I represent and warrant that I am physically fit and I have no medical condition that would prevent my full participation in the classes or workshops.</p> <p>I recognize that the classes may require some physical exertion, which may be strenuous and may cause physical injury, and I am fully aware of the risks and hazards involved.</p> <p>I hereby release Rose Yoga Center from any liability now or in the future for any injury or ailment, however caused, occurring during or after my participation in classes or workshops.</p> <p>In consideration of my participation in classes at Rose Yoga Center, I, for myself, my heirs, and assigns, hereby release Rose Yoga Center and its instructors from any claim, demands and causes of action arising from my participation in their classes or workshops.</p> <p>I have read the above waiver, and fully understand its contents.</p>
Address _____	
City _____ State _____ Zip _____	
Home Phone _____	
Work Phone _____	
Email _____	
(used only to provide updates about class schedule and communication between you and Rose Yoga)	
Physical limitations, injuries, etc _____ _____	
In emergency contact _____	
at _____	
Where did you hear about Rose Yoga Center? _____	
	<p>Signature _____ Date _____</p>