



Student Registration Form

Child's Full Name: _____ Boy/Girl: _____
Date of Birth: _____ Age: _____ Class _____
Parent's Name: _____
Address: _____
Telephone: Home: _____ Mobile: _____
Email: _____

In the case of an emergency please provide a second guardian's details:

Is this your Child's first course of YogaBugs Class? Yes: No:
If No please state when and where they did the course before.

Known allergies/physical Limitations/Concerns:

How did you hear about YogaBugs?

From time to time YogaBugs would like to send you additional relevant information about YogaBugs and yoga for children, if you are interested in receiving this information please tick here: _____

Liability Disclaimer & Notice

I individually and as parent and or/guardian of the child identified above hereby acknowledge the following notice and grant to _____ Teacher the following:

Liability Release: YogaBugs Limited ("YogaBugs") takes all reasonable care in ensuring that its programmes are safe and fun. However, I agree that my child will be engaging in physical activities that may involve some risk of injury. I acknowledge I have been advised to consult with my or my child's physician with respect to any past or present injury, illness, health problem or any other condition or medication that may affect my child's participation in the YogaBugs programme.

I assume the above risks and accept responsibility for any injury sustained by my child and discharge and hold harmless YogaBugs Limited its owners, officers and personnel including its teachers and its suppliers from any liability arising from any injury to my child or other persons or property caused by my child's participation in the YogaBugs programme IF that injury is caused either by my or my child's own fault, or by a third party unconnected with YogaBugs' provision of services, or by events which YogaBugs Limited its owners, officers and personnel including its teachers and its suppliers could not have foreseen or prevented even if they had taken all reasonable care.

Refund Classes: Prorated refunds will be given if cancellation is made in writing before the second attended class of the series. There is a £10-processing fee for refunds if you cancel a series of classes. I understand and agree that I will not receive any refund or credit for missed classes, but if cancellation of a class is due to failure on the part of Yogabugs I will be entitled to a reasonable refund of the charge for that class.

IF YOU DO NOT UNDERSTAND ANYTHING SET OUT IN THIS FORM PLEASE SPEAK TO YOUR INSTRUCTOR, OR LARA AT YOGABUGS BEFORE YOU SIGN.

Parent/Guardian Signature: _____ Date: _____

Enclosed is a cheque for £_____. Please return the cheque to: _____
and write the name of the child on the reverse of the cheque

For Teachers Use Only: Teachers Name: _____

Teaching Centre: _____

Course Dates and Length: _____ Level Taught _____