

JULY 2011 MYSORE INTENSIVE*

**please mail in form & payment (made out to Motion Center), to reserve your space*

MONDAY October 17 – FRIDAY October 21
7am start time

\$108

Name: _____ Date of Birth: _____

Address: _____

Telephone: _____ Cell Phone: _____

Email Address: _____

How did you hear about Motion Center? _____

Please list any injuries or health conditions you have had in the past 5 years:



I understand that I am registering for the July Mysore Intensive, and that full payment is required to reserve a space.

I have noted any injuries or health conditions I have, and have read and understand the Payment Policies.

signature

date

PAYMENT POLICIES:

Withdrawl 2 weeks prior to workshop: full refund

Withdrawl 1 week before workshop: 50% refund

Withdrawl less than one week before workshop: no refund

GENERAL INFORMATION:

Please inform your teacher of any current/chronic injuries or health conditions so that she may safely modify the class for you.

Please take the time to listen to your body, and never force yourself beyond your limits. Questions on how to adapt the practice to your interests and body are always welcomed by your teacher.