



**Registration Form – Tuesday Evening Hatha Yoga  
MaxineYoga Classes at Alyth (NWRS) Synagogue,  
Alyth Gardens NW11 7EN**

**Tuesday 5 September to 19 December 2017. Time: 6:15 to 7:45pm**

Name..... D.O.B .....

Address .....

Phone numbers (h) ..... (w)..... (m).....

Email (h)..... (w) .....

**What do you hope to gain from practising yoga this term? How can I best support you? .....**

.....

**Health issues: .....**

.....

**September to December 2017 Autumn term. Please tick the classes you are attending:**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Tues 5 September  | <input type="checkbox"/> Tues 17 October  | <input type="checkbox"/> Tues 28 November                 |
| <input type="checkbox"/> Tues 12 September | <input type="checkbox"/> Tues 24 October  | <input type="checkbox"/> Tues 5 December                  |
| <input type="checkbox"/> Tues 19 September | <input type="checkbox"/> Tues 31 October  | <input type="checkbox"/> Tues 12 December                 |
| <input type="checkbox"/> Tues 26 September | <input type="checkbox"/> Tues 7 November  | <input type="checkbox"/> Tues 19 December                 |
| <input type="checkbox"/> Tues 3 October    | <input type="checkbox"/> Tues 14 November | <input type="checkbox"/> <b>WINTER BREAK</b>              |
| <input type="checkbox"/> Tues 10 October   | <input type="checkbox"/> Tues 21 November | <input type="checkbox"/> <b>New Term starts<br/>Jan 2</b> |

**Cost for the Whole Term: 16 classes @£13 discounted rate = £208.00**

**Or: Total Number of Classes:..... @ £14 per class = £..... (Min of 5/£70). Or Drop in Class £16.**

Direct bank transfer to: Acc: Maxine Levy. Sort Code: 20-36-16. Acc #: 30605204  
Cheques payable to Maxine Levy, 38 Wentworth Rd, London NW11 0RL. Cash accepted.

- I accept personal responsibility for any damage or injury that I may suffer.
- I agree to the Booking Information & Missed Classes terms.  I have submitted my health questionnaire.