



Alexandra Centre Society

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A HERITAGE OF PEOPLE MEETING PEOPLE

*Evening Yoga Level 1
At The Alexandra Centre Society*

Registration Form

Name: _____

Address: _____

Postal Code: _____

Phone Number: (403) _____

Cell Number: (403) _____

Fax: (403) _____

Email: _____

Health/Physical Conditions: _____

Health/Physical Limitations: _____

I RELEASE THE ALEXANDRA CENTRE SOCIETY AND ITS OFFICERS, DIRECTORS, AGENTS, REPRESENTATIVES, EMPLOYEES AND VOLUNTEERS, FROM ANY AND ALL RESPONSIBILITY, LIABILITY, OR CLAIMS (INCLUDING ANY OF SUCH BASED UPON THEIR ALLEGED NEGLIGENCE), FOR PERSONAL INJURY, DAMAGES, ACCIDENT, OR ILLNESS INCURRED BY MYSELF, ARISING FROM OR RELATED TO MY PARTICIPATION IN ANY ACTIVITY AT OR CONNECTED WITH THE ALEXANDRA CENTRE SOCIETY.

X _____

Signature

Print Name

Date

Date of Classes:

Cost Of Class: \$90. area residents \$100. out-of-area

Mondays 7:15-8:30 pm 12 weeks

If you have not already purchased a Nov'07-Dec'08 membership in the Society, please add \$1.00

Sept 22nd-Dec 15th'08 No class Oct 13th'08

Paid By: _____