



Yoga Class
Registration Form
2013

Payment Contact: Temple Off. @ 262-695-1200

Yoga Questions /Issues Contact:

Thulasi or Dr.Ahuja at ourhtw.yoga@gmail.com

Visit us @

http://www.ourhtw.org/temple/website/?page_id=134

MEMBER INFORMATION (PLEASE PRINT OR TYPE): New Member Renewal

First Name:		Last Name:	
Street Address:			
City:		State:	ZIP Code:
Telephone:		E-Mail:	
Add Member: <input type="checkbox"/> No <input type="checkbox"/> Yes	If yes, Name:		
Children(5-11yrs): <input type="checkbox"/> No <input type="checkbox"/> Yes How many?	Name(s):		

PLEASE CHECK: I would like to donate \$ _____ towards Yoga Fund.

PAY BY: Cash Check Credit card

(Please make checks payable to: Hindu Temple of Wisconsin. All donations are tax deductible. All instructors are certified volunteers! Your donation will not only support the yoga program's special sessions, it will also support the temple for providing space and other amenities. Those who are unable to pay as a result of financial hardship please contact Dr. Manohar Ahuja)

ACKNOWLEDGEMENT INFORMATION:

I /We assume full responsibility for attending yoga classes and any consequences that may result such as injury etc. The instructors or Temple authorities will not be held responsible. Medical clearance will be obtained from my/our doctor prior to attending yoga classes.

Signature: _____ **Date:** _____

CLASS INFORMATION: Please check the notice board and the website

FEE INFORMATION:

Time	Single	Family
<input type="checkbox"/> Quarterly (3 months)	\$100.00	\$150.00
<input type="checkbox"/> Semi Annual (6 months)	\$150.00	\$225.00
<input type="checkbox"/> Annual (1 year)	\$200.00	\$300.00
<input type="checkbox"/> 1 day pass (for trying out a yoga class)	\$5.00	
<input type="checkbox"/> 1 week pass (for trying out yoga class)	\$15.00	