Detach here Yoga Practice Center, LLC 8 Week Winter Session January 9 - February 29, 2024 Name Address Phone E-Mail Class Day Fee Time Detach Fee Paid Do you have any current physical conditions that will impact strenuous exercises? Yes \bigcirc No \bigcirc If Yes, please give details: I, the undersigned, voluntarily register for yoga class(es) and agree to assume full responsibility for my health and well-being while I am participating in class. I have read the class descriptions & I am enrolling into the class level most suitable for me. I will not ever hold Yoga Practice Center or the instructor responsible for illness or injury occurring in a yoga class, or while I am on the premises. I understand yoga is challenging and vigorous with risks. I have read & agree to follow studio policies. Signature: Date: Yoga Practice Center, LLC Detach here Studio Mailing Address 9885 Ann Arbor Road West

Plymouth, MI 48170

* Registration & Payment appreciated by January 9, 2024.

* If you are unwell please do not come to class.

* Wearing a mask in the building and during class is optional, do what makes you feel safe.

* Bring Your Own Sticky Mat and any other equipment you want. Limited studio equipment is available if you prefer.

8 Week Winter Schedule: January 9 - February 29, 2024

| Monday | Tuesday | Wednesday | Thursday |
|---|--|---|---|
| | 11:00am-12:30pm | | 11:00am-12:30pm |
| | Ageless | | All Levels |
| | Gentle & Slow | | Strength & Stamina |
| | easy beginning | | practice beginning an |
| | poses practiced | | & advanced poses, |
| | with support. | | inversions, as able. |
| | | 6:30pm-8:00pn | n |
| All Levels | | | |
| | | Strength & Stam | |
| emai yogapractice@ | | practice beginning | |
| yogapraetiee@ | ginan.com | advanced pose inversions, as ab | |
| | | | |
| | | | |
| Studio Polic | ies Please read this before s | signing registration for | |
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| ♦ Please, Regis ♦ Make-Up Cl | ster 5 days before session beginster 5 days before session beginstered asses: Due to class size limiat | ns, it is helpful to kno | ow your plans. |
| ♦ Please, Regis ♦ Make-Up Cl plan on maki | ster 5 days before session begi asses: Due to class size limiat ing up a missed class. | ns, it is helpful to kno ions please let Lynlee | ow your plans. |
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| 8 Week Winter Yoga Fees | Registration | Clothing & Equipment |
|---|---|---|
| Winter Session \$160 | Please return your signed | Wear t-shirt, tights or shorts, Yoga is practiced in Bare Feet. |
| Drop-in 1 class \$25 Check: Yoga Practice Center | registration form and full payment BEFORE you | *No perfumed products.* |
| PayPal, Cash, Venmo Fees appreciated by 1/9/24 | <pre> come into your first class, Thank You.</pre> | Please, bring your own mat & any props you may want. |
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