



# Living Yoga Program

8206 Stillwood Lane ♦ Austin Tx ♦ 78757-7635 ♦ U.S.A.  
(512) 266-7926 (voice mail) ♦ [www.livingyogaprogram.com](http://www.livingyogaprogram.com)

*Building a caring, diverse, and empowered yoga community.*

## Course Registration

Date ..... Male \_\_\_\_\_ Female \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Name .....  
 Address .....  
 City/State/Country/Zip.....  
 BEST Telephone (     ) ..... Evening Telephone (     ).....  
 E-mail address .....  
 Emergency contact name AND relationship to you .....  
 Emergency contact's BEST Telephone (     ).....

"X" to select	Dates	Module Information	Price	Total Fee per row
	July 14-23, 2017	<b>Module 1 Immersion Training</b> 7am – 9pm daily (starts 4pm Friday, ends 12p Sun) 100 hours of training	\$2100 Prior to 6/14/17 \$2250 after 6/14/17	
	Oct 18-19, 2017	<b>Module 2 – Yoga Anatomy</b> 9am-9pm daily; 20 hours of training. Onsite Registration Wed only, 7:30am Lunch and dinner included. Breakfast additional.	\$460 Prior to 9/20/17 \$500 after 9/20/17	
	Oct 20-22, 2017	<b>Module 3 – Texas Yoga Retreat</b> 7am – 9pm daily; 30 hours of training. Onsite Registration Friday 6am.	\$715 Prior to 9/20/17 \$760 after 9/20/17	
	Oct 23, 2017	<b>Module 4a</b> 7am – 9pm daily; 10 hours of training. No onsite Registration	\$240 Prior to 9/20/17 \$255 after 9/20/17	
	Oct 24, 2017	<b>Module 4b</b> 7am – 9pm daily; 10 hours of training. No onsite Registration	\$240 Prior to 9/20/17 \$255 after 9/20/17	
	Oct 25, 2017	<b>Module 4c</b> 7am – 9pm daily; 10 hours of training. No onsite Registration	\$240 Prior to 9/20/17 \$255 after 9/20/17	
<b>OR Save \$85 by registering for all 5 modules below...</b>				
	Oct 18-25, 2017	<b>Modules 2, 3, &amp; 4 (a, b &amp; c)</b>	\$1810 Prior to 9/20/17 \$1,940 after 9/20/17	

**TOTAL COURSE FEE HERE (Subtotal 1):** \_\_\_\_\_

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**EVENT LOCATION:** Ancient Yoga Center, JKP Radha Madhav Dham ashram, Austin, Texas, U.S.A.

Modules do **not** have to be completed in numeric order. Registration price includes meals during course hours. Additional meals and overnight accommodations are separate (see below).

**ACCOMMODATION FEES:** Accommodations at the ashram are not included in the registration fees. They are *required* for Module 1 Residential program and *optional* for Modules 2-4.

"X" to select	SHARED BATH	BATH IN ROOM	# NIGHTS	ARRIVAL DATE & TIME	DEPARTURE DATE & TIME	Total Fee
1 PERSON	\$100/night	\$130/night				
2 PEOPLE	\$90/night	\$110/night				
3+ PEOPLE	\$65/night	\$85/night				

**TOTAL ACCOMMODATIONS FEE (Subtotal 2):** \$ \_\_\_\_\_

**ADDITIONAL MEALS** \$15/each. List specific dates and meals needed here:

**TOTAL ADDITIONAL MEALS (Subtotal 3):** \$ \_\_\_\_\_

**COMMUTERS** are those staying offsite overnight. *Commuting is not an option for the Module 1 Residential program* but ok for Modules 2-4. Commuter days \_\_ x \$15/day

**TOTAL COMMUTER FEE (Subtotal 4):** \$ \_\_\_\_\_

We cannot guarantee room selection and may need to upgrade or downgrade your room, depending upon availability. We will call/email you in advance if this occurs.

**Please indicate your 2<sup>nd</sup> choice for type of room in case your first is not available:** \_\_\_\_\_

**Please indicate your 2<sup>nd</sup> choice for type of bath in case your first is not available:** \_\_\_\_\_

Name of person(s) with whom you would like to share a room, if applicable \_\_\_\_\_

\* If you are staying in a shared room without a roommate preference, we will select one for you.

**CANCELLATION AND REFUND POLICY**

- Minimum 7 calendar days written email notice in order to receive a refund.
- \$100 charge for all cancellations. This charge will be deducted from refund.
- Registrants who cancel in under 7 calendar days forfeit \$150.
- To cancel, send written email notice to Ellen Smith at [ebsmith@livingyogaprogram.com](mailto:ebsmith@livingyogaprogram.com)
- Refunds will not be issued for late arrivals, unattended events, early termination of attendance, no-shows, or meals.
- In the event that Living Yoga Program cancels an event, we will refund all registration fees collected in full (the application fee is non-refundable).
- Allow 2 weeks after last day of event for refund check to be mailed.
- **Initial** \_\_\_\_ *I certify that I have read the LYP Cancellation & Refund policy.*

**EMAIL REGISTRATION TO:** Ellen B. Smith at [ebsmith@livingyogaprogram.com](mailto:ebsmith@livingyogaprogram.com)

**OR**

**SNAIL MAIL REGISTRATION TO:**

Living Yoga Program  
8206 Stillwood Lane  
Austin, Texas 78757-7635

**Questions?** Call our 24/7 voice mail line at 512-266-7926

Please allow 2 weeks for processing. Once registered, we will E-mail a confirmation letter to you.

**CALCULATING YOUR FEES:** A \$150 deposit reserves your place and is applied to your balance due. Balance of fees is due 31 days prior to the start of the event.

\_\_\_\_\_ Total Course Fee (Subtotal 1)

\_\_\_\_\_ Total Accommodations Fee (Subtotal 2)

\_\_\_\_\_ Total Additional Meals (Subtotal 3)

\_\_\_\_\_ \$15/day Commuter fee (Subtotal 4)

\_\_\_\_\_ Non-refundable \$150 Living Yoga Program *Application Fee (disregard if previously paid)*

\_\_\_\_\_ **Grand Total** (check payment method below)

< \_\_\_\_\_ > Subtract any amount you are paying now. \$150 deposit reserves your space. Deposit is APPLIED to your balance due. It is separate from the Application fee.

\_\_\_\_\_ Amount still owed to Living Yoga Program, if applicable

<p><input type="checkbox"/> I used <i>PayPal</i> to pay my fee on the Living Yoga Program <a href="http://livingyogaprogram.com/payments.htm">link</a>. <a href="http://livingyogaprogram.com/payments.htm">http://livingyogaprogram.com/payments.htm</a></p> <p><input type="checkbox"/> I am enclosing a personal check or money order payable to <i>Living Yoga Program</i>.</p> <p><input type="checkbox"/> I authorize the LYP staff to charge my credit card. Initial here _____</p>	<p><b>Credit Card:</b> <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> Discover <i>(We do not take American Express)</i></p> <p><b>Expiration Date:</b> ____ / ____ (Month/Year)</p> <p><b>Credit Card #</b></p> <p><b>Signature for Credit Card:</b> (type signature if submitting electronically) _____</p>
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### Agreement of Release and Waiver of Liability

I, \_\_\_\_\_, hereby agree to the following:

That I am participating in the Living Yoga Program and/or the Texas Yoga Retreat, which includes but is not limited to Yoga and Qigong Classes, Workshops, Health Programs, and School, and is offered by the Living Yoga Program, L.L.C. and Charles MacInerney, and Ellen B. Smith, during which I will receive information and instruction about yoga, qigong, and health. I recognize that yoga and qigong require physical exertion, which may be strenuous and may cause physical injury, and I am fully aware of the risks and hazards involved.

I understand that it is my responsibility to consult with a physician prior to and regarding my participation in the Yoga and Qigong Classes, Workshops, Health Programs, and School. I represent and warrant that I am physically fit and I have no medical condition which would prevent my full participation in the Yoga and Qigong Classes, Workshops, Health Programs, and School. I have agreed to inform my teachers of any physical discomfort, and if I have not informed them of any physical discomfort, I have consciously chosen not to and I

take full responsibility for my choice. In consideration of being permitted to participate in the Yoga and Qigong Classes, Workshops, Health Programs, and School, I agree to assume full responsibility for any risks, injuries or damages, known or unknown, which I might incur as a result of participating in the program.

In further consideration of being permitted to participate in the Yoga and Qigong Classes, Workshops, Health Programs, and School, I knowingly, voluntarily and expressly waive any claim I may have against The Living Yoga Program, L.L.C. and Charles MacInerney, and Ellen B. Smith for injury or damages that I may sustain as a result of participating in the program. This release and waiver of liability covers all classes I ever participate in with The Living Yoga Program, L.L.C. and Charles MacInerney, and Ellen B. Smith, current and into the future.

I, my heirs or legal representatives forever release, waive, discharge and covenant not to sue The Living Yoga Program, L.L.C. and Charles MacInerney, and Ellen B. Smith for any injury or death caused by negligence or other acts.

I have read the above release and waiver of liability and fully understand its contents. I voluntarily agree to the terms and conditions stated above.

Date: \_\_\_\_\_

Signature of Participant: \_\_\_\_\_

Sign here only if participant is under 18: As Legal Guardian of \_\_\_\_\_, I consent to the above terms and conditions.

Signature of Legal Guardian: \_\_\_\_\_