

Name:

Address:

Phone #s:

Email:

Date of birth & age:

How did you find out about this class?

___ I have taken yoga classes before ___ I am new to yoga

I am enrolled in yoga for the following reasons:

___ gain mobility ___ gain flexibility ___ increase body alignment ___ reduce stress

___ body awareness ___ overall health ___ fitness program ___ gain strength

___ calm the mind ___ weight loss ___ meditation techniques ___ breathing techniques

Have you had a car accident or surgery in the past 3 years? If yes, please describe:

Have you had any major injuries or sicknesses during your life?

Are you presently under a doctor's care? Why? Any medications?

Are you pregnant? ___ When is baby due? _____

Do you have any of the following?

heart condition ___ dizziness ___ high blood pressure ___ low blood pressure ___

joint pain (where) _____ asthma ___ diabetes ___ fibromyalgia ___

depression ___ ulcers ___ back issue (describe) _____

knee problems ___ neck problems (describe) _____

shoulders problems _____ hearing difficulty ___ wear glasses/contacts ___

(please do not wear contacts to class) digestive disturbances ___ diarrhea ___

constipation ___ arthritis (where) _____ allergies ___ sinus

problems ___ other _____

Waiver:

I, the undersigned, hereby represent, warrant and advise Yana Yoga that I have taken all reasonable steps to assess my medical condition and warrant that I am free of any physical conditions, limitations or general health problems that would impede my ability or would result in injury or worsening of any health problem or physical condition due to my participation in yoga activities.

I acknowledge that yoga activities involve certain exercises and exertions and that I will immediately advise Yana Yoga if I have any concern, knowledge or reason to believe that my medical or physical condition or general health would be impacted by participating in the yoga activities.

Emergency contact:

Relationship:

Phone:

Executed this day of 20 .

Your signature (parent/guardian if under 18):

Yana Yoga witness: Application accepted this day of , 20

Childrens' Own Yoga Form

Please review with your child and initial for each of these necessary personal behaviours prior to first class.

___ Yoga is not a competitive sport; I will pay attention to myself and not stare at others

___ I will not touch anyone while doing individual exercises on mats. Keep my hands to myself.

___ If an exercise feels uncomfortable, I will respect my body and stop and tell Yana.

___ I will get enough sleep at night so my body is rested and able to exercise.

___ I will eat good foods to help keep my body healthy; and eat lunch at school every day.

___ I will let Yana know of any bodily changes, injuries, aches...

___ Like in any classroom, I will respect the teacher when talking.

___ It is normal and healthy to burp, fart or have to go to the washroom while exercising. This means your body is working properly! I will listen to my body.

(print/write name)