

## STUDENT PARTICULARS

Name:(print full name and underline last name)		
Mobile No.:	Gender: Male 🗆	Female □
Date of Birth:		
Health Issues or Injuries:		
How did you hear about KPY?:(if via a fri		
(if via a fri	end, please say who)?	
LOGIN DETAILS:		
Email (username):		
Password (at least 8 characters, alphanumeric,	case sensitive):	
☐ Please tick this box if you would like to <b>opt out</b> of Calm & Bendy monthly newsletter, which provides you	ou with the latest news and	d happenings.
KPY respects your privacy and will not shar	e your particulars with any th	ird party.
WAIVER AND TERM	AS AGREEMENT	
I understand that yoga includes physical movements and injury, even serious or disabling, is always present and can discomfort, I will listen to my body, adjust the posture an teacher of any injuries or changes in my health (including	not be entirely eliminated. If I ad ask for support from the to	experience any pain of
Yoga is not a substitute for medical attention, examination and is not safe under certain medical conditions. I affirm practise yoga. I hereby agree to irrevocably release and may have against Kate Porter Yoga Pte Ltd (KPY) or any te	n that I alone am responsible waive any claims that I have	e to decide whether to
I agree to be bound by the Terms and Conditions of KPY KPY" booklet and those detailed on the KPY website.	$\prime$ , the terms laid out in the " $ m C$	Getting the Most Out o
<ul> <li>All fees and packages are non-refundable and non</li> <li>Packages are only valid for the period stated, they</li> <li>There is a 2-hour cancellation policy for class book booked class is chargeable.</li> </ul>	cannot be extended.	e or not turning up for c
KPY reserves the right to change facilities and class schedule or damage of any personal belongings at the KPY Studio.	es from time to time. KPY is no	ot responsible for the loss

Today's date

**Signature** (if under the age of 18 please have parent or guardian sign)