



Registration Form: 'Teaching Yoga to Children Workshop'

Name: _____

Address: _____

Phone: _____ Mobile: _____

Email: _____

Please outline your yoga experience: _____

What do you hope to gain from attending the workshop? _____

Please tick:

Are you a: parent childcare worker school teacher yoga teacher

other *Please specify* _____

Are you a member of YTAA? yes no

Workshop dates: _____

Amount due \$ _____

Payment by Cheque (cheque payable to: Magic Monkey Yoga Kids)

Post to: Magic Monkey Yoga Kids
PO Box 157
Manly NSW 2095