



White Tantric Yoga®

Registration & Release of Liability

Registration

WTY City Name	Chicago, IL			WTY Date	Year	Month	Day
					2018	4	28
Your First Name		Last Name		Spiritual Name			
Street Address							
City		State		Zip/Postal		Country	
Phone		Email					
I qualify as a:	<input type="checkbox"/> Senior (65+) <input type="checkbox"/> Full-Time Student / Name of School: <input type="text"/>						
WTY Fee Paid:	<input type="text"/>	Payment Method:	<input type="checkbox"/> Credit Card <input type="checkbox"/> Check <input type="checkbox"/> Cash <input type="checkbox"/> Other <input type="text"/>				

Release of Liability

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The person signing this Release further agrees and understands that nobody has made any warranties about the safety and protection of his or her person and possessions during participation by the undersigned in WHITE TANTRIC YOGA®. The person signing this Release voluntarily takes part in WHITE TANTRIC YOGA® at his or her own risk.

Signature:

Date Signed:

Survey

Is this your first WTY course? Yes No

Do you currently receive mail and/or e-mail from 3HO regarding WTY and other teachings of Yogi Bhajan? Yes No

If not, may we add you to our distribution list? Yes No

You will receive the free Aquarian Times Magazine and 3HO community news, Kundalini Yoga Exercises and Meditations, Prosperity Technology, information on Women's Health and Consciousness, Sikh Dharma lifestyle, information about White Tantric Yoga® and special offers.

Contact

Mailing Address & Checks Payable To:

Kundalini Yoga in the Loop
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(312) 922-4699 www.ShaktaKaur.com

WTY Event Held At:

Jones College Prep High School
700 S State Street
Chicago, IL 60605

www.WhiteTantricYoga.com