



Registration form

Surname..... First name.....
Date of birth..... Place of birth.....
Address.....
Zip code + City.....
Phone number..... E-mail address.....
Mobile number.....

Participation in our lessons is subject to our general terms.
We advise you to read these carefully.

Hereby I subscribe as a student of the Iyengar YogaSchool Amsterdam.

Place.....Date.....signature.....