THE YOGA BARN 997 HWY 341 CENTREVILLE,NS B0P 1J0

I am registering for THE YOGA BARN/ TAYS Yoga Teacher training starting \_\_\_\_\_\_.

I have paid my \$500 deposit.

I agree to have my credit card charged in the amount to \$437.75 on the 8 following dates:

October 15th	_
November 15th	
December 15th	
January 15th	<u>.</u>
February 15th	
March 15th	
April 15th	
May 15th	

I understand that if I choose to leave the Yoga Teacher Training program that the above amounts will still be charged to my credit card. \_\_\_\_\_ (please initial)

Date:	_
Credit card:	
Name on Credit card:	

Signed:	
Expiry:	
Name of participant (please print):	
Address:	
Phone:	