



Registration Form

name: _____ date: _____

address: _____ city: _____

state: _____ zip: _____ email: _____

phone: _____

work phone: _____

How did you hear about us? _____

Day	Time	Instructor	# of weeks	Cost

Total \$ _____

Please enclose your check and mail to:

Yarmouth Yoga Studio

374 US Route One

Yarmouth, ME 04096