



The School of  
ROYAL YOGA, Inc.

908-879-9648

**YOGA REGISTRATION FORM**

Date \_\_\_\_\_

A \$30.00 non-refundable deposit for each class is required. Telephone registration is accepted.  
Visit our website at [www.TheRoyalPathwaysInc.com](http://www.TheRoyalPathwaysInc.com) email: [RoyalYoga@embarqmail.com](mailto:RoyalYoga@embarqmail.com)

Mailing Address: 57 Main Street, Suite 7 Chester, NJ 07930

Name(s): \_\_\_\_\_

New Student

Returning Student

Address: \_\_\_\_\_

**Pay by Credit Card**

Charge full tuition now Charge deposit only

Visa/MC/AMX/Disc. # \_\_\_\_\_

Verification #(last 3 or 4 digits on back) \_\_\_\_\_

Expiration date: \_\_\_\_\_

Signature: \_\_\_\_\_

Phone: \_\_\_\_\_

**For Children:**

Child's Name & Age: \_\_\_\_\_

Child's Name & Age: \_\_\_\_\_

*Thank you!*

**I would like to receive notices and registration letters via E-mail**

Yes  No E-mail Address: \_\_\_\_\_

**MAKE-UP POLICY: Adult students are welcome to make up missed Yoga classes during the same session.**

**REFUND POLICY: Deposits are non-refundable. Any additional payments made are refundable if The School of Royal Yoga is notified before the first day of that session.**

**The School of Royal Yoga Classes**

RECEIVE A 5% DISCOUNT WHEN REGISTERING AND PAYING IN FULL PRIOR TO END OF PREVIOUS SESSION.

Checks made payable to: The School of Royal Yoga

Multiple Class Discount and Family Discount Rates Available. Please inquire.

<u>Day</u>	<u>Class</u>	<u>Time</u>	<u>Fee</u>

**The Center for Special Needs, Inc. Classes**

Checks made payable to: The Center for Special Needs, Inc.

<u>Day</u>	<u>Class</u>	<u>Time</u>	<u>Fee</u>

The Center for Special Needs at The School of Royal Yoga is a non-profit organization offering specialized Yoga classes. It serves the community without regard to a person's race, creed, religion, gender, origin, sexual preference or ability to pay.

For Office Use Only

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**DEPOSIT:**  
Cash/Check Amount \_\_\_\_\_  
Visa/MC/AMX/Disc. Amt \_\_\_\_\_  
Check Number \_\_\_\_\_  
Date Received \_\_\_\_\_  
Computer Entry \_\_\_\_\_  
Charge Entered \_\_\_\_\_  
Authorization \_\_\_\_\_

**BALANCE DUE:**  
Cash/Check Amount \_\_\_\_\_  
Visa/MC/AMX/Disc. Amt \_\_\_\_\_  
Check Number \_\_\_\_\_  
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