



(978) 475-2020
www.YangsAndover.com

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_PC
_DT

Intro. to Tai Chi/Qigong Registration

Name: _____ Birthdate: ____/____/____
Address: _____ Apt. # _____
City: _____ State: _____ Zip: _____
Day Phone Work or Cell: () _____ Evening Phone: () _____
Email: _____

How did you find out about this course? _____

Do you have any previous Tai Chi experience (not required)? _____

Do you have any medical concerns or injuries (past or present) we should be informed of? _____

FREE Intro. to Tai Chi

Tues. Apr. 14
7:00 - 8:15 PM

Thurs. Apr. 16
10:30 - 11:45 AM

Sun. Apr. 19
8:45 - 10:00 AM

<i>Spring 2020</i>	Early Registration 5 days before start date	Regular
6-week sessions: <input type="checkbox"/> Tues. Apr. 21 7:00 - 8:15 PM <input type="checkbox"/> Thurs. Apr. 23 10:30 - 11:45 AM <input type="checkbox"/> Sun. Apr. 26 8:45 - 10:00 AM <i>No class 5/24</i>	<input type="checkbox"/> \$ 89.00	<input type="checkbox"/> \$ 105.00



Make Check to: Yang's Martial Arts and mail to P.O. Box 1894, Andover, MA 01810 or complete below for credit card registration.

TO REGISTER BY MAIL

Type of card: Visa Mastercard Discover AMEX
Name on card: _____ \$ _____
Signature: _____
Card # Exp:

RELEASE AND WAIVER OF LIABILITY:

In consideration of services to be received as a participant on these premises, the undersigned hereby releases and forever discharges Bodies In Motion, Inc. d/b/a Yang's Martial Arts Assoc. and Yang's Fitness Center (Yang's), it's heirs, successors, administrators and assigns from any and all actions, cause of actions, liability, claims and demands upon or by reason of any damage, loss, injury or suffering known and unknown which may be sustained by participants named above in connection with and in the course of receiving the Yang's training and techniques on these premises, from the instructor or instructors, staff, official or employees of this association or any fellow students on the premises in connection therewith and within the course of taking training or lessons for the purpose designed in this application. He/She hereby waives all his/her rights to claims, actions, cause of action, demands for suit of loss, injury, damage, or suffering sustained as a result of anything other than gross negligence on the part of Yang's. As a precondition to admission, the undersigned represents that he/she is physically fit to participate in such training and techniques offered at Yang's. NOTE: All participants should consult with a physician prior to entering an exercise program or upon any changes in your health.



Payment Policy:

If you are not satisfied with this program after attending your first class, any payments made for this program are refundable the DAY OF the class. Thereafter, all payments are non-refundable and non-transferable in the event you are not able to finish this course. ALL refunds subject to a 10% processing fee.

Signature of Applicant (required)