

# YOGA FOR KIDS CLASS SERIES

Tuesdays afterschool until 3:30  
5/16-6/20

With Kathleen Peek, M.Ed.

Sign your kiddos up to learn and explore yoga poses and breathing techniques, play games, sing songs, and end each class with relaxation. Through movement and creativity, students will learn to calm their minds and strengthen their bodies. This class promotes physical, emotional and social development and leaves children with a calm, focused and balanced body and mind. *\*Mats are provided.*

\$70 for 6 Class Series



Kathleen Peek, M.Ed. is an experienced and licensed classroom teacher who loves sharing her passion for yoga with kids. She is certified to teach both children and adults and has been teaching yoga to kids for over 8 years.

To register, fill out the form on the back of this flyer and pay by check/cash on the first day. You can also pay online by following the 'Schools' link at:

[www.yogaforkidsportland.com](http://www.yogaforkidsportland.com)

For more information, email: [yogaforkidsportland@gmail.com](mailto:yogaforkidsportland@gmail.com)

## Yoga for Kids Portland Registration Form

Today's Date: \_\_\_\_\_

Child's Full Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Boy \_\_\_\_\_ Girl \_\_\_\_\_

Parent/Guardian Full Name: \_\_\_\_\_

Address: \_\_\_\_\_ Apt. \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mobile: \_\_\_\_\_ Home: \_\_\_\_\_

Work: \_\_\_\_\_ Caregiver: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact and Number: \_\_\_\_\_

Please list all known allergies, physical limitations, concerns and goals:

\_\_\_\_\_

\_\_\_\_\_

How did you hear about us? \_\_\_\_\_

### **Liability Disclaimer & Notices: please read carefully**

I individually and as parent and/or guardian of the minor child identified above hereby acknowledge the following notices and grant to Yoga for Kids Portland the following release from liability:

**A.** I acknowledge and fully understand that I, or my child, will be engaging in physical activities that may involve some risk of injury. I acknowledge and have been advised that it is my responsibility to consult with my or my child's physician with respect to any past or present injury, illness, health problem or any other condition or medication that may affect my or my child's participation. I assume the foregoing risks and accept full personal responsibility for any personal injuries sustained by my child which might incur as a result of participating in this program and discharge and hold harmless Yoga for Kids Portland, its owners, directors, members, employees and agents from any claim, cause of action or liability for damages arising from any personal injury to my child or other persons or property caused by myself or my child's participation in the Yoga for Kids program.

**B.** I clearly understand that cancellations are to be made before the third attended class in order to receive a prorated refund. I agree and understand that there is a \$40 processing fee for all refunds and that I will not receive any refund or credit for attended classes.

**C.** I agree / disagree to give Yoga for Kids Portland permission to use photographs of myself or my child for any Yoga for Kids Portland promotional materials. I understand that my child will not be identified by name, nor will any compensation be extended for such use.

Parent /Guardian Signature \_\_\_\_\_