

YOGA FITNESS SIGNUP FORM

To reserve a space in class, please print this form and send full payment (for free classes - see below), for your class selection(s):

Name: _____

Street Address: _____

Town: _____ State: _____ Zip Code: _____

Daytime Phone Number: _____ Evening Phone Number: _____

Email Address: _____

- | | |
|---|---|
| <input type="checkbox"/> Yoga Fitness - 10 Classes
Class Day and Time: _____ | \$175 (12 classes with prepayment before starting date) |
| <input type="checkbox"/> Yoga Fitness - 20 Classes
Class Day and Time: _____ | \$275 (Come twice a week and save!) |
| <input type="checkbox"/> Training Smart with Dumbbells | \$65 |
| <input type="checkbox"/> Mindfulness Meditation Training | \$70 |
| <input type="checkbox"/> How to Burn Body Fat | \$65 |
| <input type="checkbox"/> Personal Training/Fitness Consultation | \$75 per hour |

Please make the check payable to: Peter Dolan

And mail to: Peter Dolan
13 Anthony Road
Bedford, MA 01730
Telephone: 781-275-2719

Thank You!