



Fall Yoga Retreat
Art of Natural Living Retreat Center
Boone, North Carolina
October 23-26, 2015
Registration Form

Name _____
Address _____
City _____ State _____ Zip _____
Phone _____ Email _____
Emergency Contact _____

Roommate/s _____

Room Request: ____Hotel ____Retreat
____Single ____Double ____Triple ____ Need Roommate

Yoga Experience _____
Any Injuries, limitations, or things I should know about
you _____

Ever been to a Yoga Retreat? ____Yes ____No

Do you have any special requests for this retreat?

Any special Dietary issues? _____

Travel Plans
____Driving? ____ Interested in Carpooling?
____Flying? ____ Need Airport pick up?

Deposit

A \$250.00 deposit check is required made out to:

Lauren Davis

3803 Palmetto Dr. Myrtle Beach, SC 29577

Remainder of Retreat fee is due no later than September 1, 2015

No refunds after October 1st unless space can be filled

I have read and understand the deposit and refund policy

Signature _____ Date _____

For more information visit:

www.artoflivingretreatcenter.org or www.laurendavislive.com

lauren@laurendavislive.com or 925-683-5623