

Kriya Yoga International

Hariharananda Gurukulam, Balighai, Puri, Orissa, India

Guest Registration Form

(For residents from USA / Canada / South America / Australia / New Zealand)

Please fill out the form below (check the box that applies) and return both pages with your payment.

Name: _____ Gender: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email Address: _____

Emergency Contact Name & Phone: _____

Date initiated into First Kriya in Paramahansa Hariharananda's lineage: _____ (mm/dd/year)

Initiated by: _____

Date initiated into Second Kriya in Paramahansa Hariharananda's lineage (specify parts received):

_____ (mm/dd/year) Initiated by: _____

_____ (mm/dd/year) Initiated by: _____

I would like to register for ____ days (s). The dates are specified below.

Enclosed is a check/money order for \$_____ [number of days ____ x \$20.00 per day], which includes simple accommodation and meals, **made payable to Kriya Yoga Institute**. If paying by PayPal from USA add 3% service charge and from any other countries add 4% service charge.

My dates of attendance will be: _____ **to** _____ **20**_____.

I will arrive on _____ (mm/dd/year) at _____ am/pm

and depart on _____ (mm/dd/year) at _____ am/pm.

Include all flight details here: _____

Please mail this form to: Kriya Yoga Institute, Guest Registration for Prajnana Mission, PO Box 924615, Homestead FL, 33092

By signing below I agree that I will abide by the code of conduct of Kriya Yoga Institute and Prajnana Mission, and will not hold Kriya Yoga Institute and Prajnana Mission, liable for any injuries, illness, or losses that may occur during my attendance, or use of the Kriya Yoga Institute facilities.

I agree that Kriya Yoga Institute and Prajnana Mission, and its agents, staff, employees, and instructors shall not be liable for any injuries or any damages to any registrant or guest, or be the subject to any claim, demand, injury or damages, whatsoever, including without limitation, those damages from acts of passive or active negligence on the part of Kriya Yoga Institute and Prajnana Mission, its officers, staff, employees or agents. Registrant does hereby expressly forever release and discharge Kriya Yoga Institute and Prajnana Mission from all such claims, demands, injuries, damages, actions or causes of action whatsoever. Registrant acknowledges that he/she has carefully read this paragraph and fully understands that this is a waiver and release of liability.

Registrant will at all times indemnify and hold harmless Kriya Yoga Institute and Prajnana Mission, its agents and licensees from and against any and all claims, damages, liabilities, costs and expenses, including but not limited to reasonable legal expenses arising out of my attendance, or use of the Kriya Yoga Institute and Prajnana Mission facilities.

Registrant's Signature: _____ Date: _____

Print Name: _____ (Only one registrant per form)