

# Kriya Yoga International

*Hariharananda Gurukulam, Balighai, Puri, Orissa, India*

## Guest Registration Form

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

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 US\$\_\_\_\_\_ [number of days \_\_\_\_x US\$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, PO Box 924615, Homestead FL 33092. You could also email this form to [institute@kriya.org](mailto:institute@kriya.org), if you paying via PayPal.**

*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)