

# 2019 International Intensive Kriya Yoga Seminar (IIKYS)

January 14 – 20, 2019

At Hariharananda Gurukulam, Balighai, Puri, Odisha, India

## Registration Form

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

Please fill out the form below and send to Kriya Yoga Institute along with your payment.

Name: \_\_\_\_\_ Gender: \_\_\_\_\_

Street Address: \_\_\_\_\_

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

Preferred Phone: \_\_\_\_\_/\_\_\_\_\_ Email Address: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Date initiated into First Kriya in Paramahansa Hariharananda's lineage: \_\_\_\_\_ (mm/dd/yyyy)

Initiated by: \_\_\_\_\_

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

\_\_\_\_\_ (mm/dd/yyyy) Initiated by: \_\_\_\_\_

\_\_\_\_\_ (mm/dd/yyyy) Initiated by: \_\_\_\_\_

I would like to register for \_\_\_\_\_ days (s) during the IIKYS. The dates are specified below.

Enclosed is a check/money order for \$\_\_\_\_\_ (number of days \_\_\_\_\_ x \$30.00 per day), which includes simple accommodation, meals, and attending the program, **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.)

I will arrive at Hariharananda Gurukulam on \_\_\_\_\_ (mm/dd/yyyy) at \_\_\_\_\_ am/pm and depart on \_\_\_\_\_ (mm/dd/yyyy) at \_\_\_\_\_ am/pm.

My flight details here: \_\_\_\_\_

Please mail this form to: Kriya Yoga Institute, 2019 IIKYS, P.O. Box 924615, Homestead FL, 33092

(In the event of cancellation there will be a \$30.00 non-refundable deposit.)

*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)