Note: To ensure the data you enter is saved, please download the form and fill it out in a dedicated PDF viewer (like Mac's Preview or Adobe Acrobat/Reader). If you fill out this form in your browser (i.e. Chrome's PDF preview), you must click "Print", then "Save as PDF" to save the completed form!

Mindful Living

Course Registration Form

To register for a Mindful Living course, please send this completed form either by email to mindfullivingbc@gmail.com or by post to Mindful Living, 203A-2678 W. Broadway, Vancouver, BC V6K 2G3. Please see the "register" page on the website for payment options.

Please see the "register" page of	i the website for payme	ent options.	
Name:		Date:	
Telephone: (H)	(W)	(cell)	
Address:		Postal Code:	
		(for course-specific information only	
Course I am applying for: _		Start date:	
How did you hear about th	is course?		
What experience do you h	ave with meditatio	n, if any?	
Are you currently seeing a	therapist? Yes	No	
Therapist's name:			
GP's Name:			
Emergency contact name 8	} phone:		
Payment method or amour	nt enclosed:		
Thank you.			
		(Business No. 82428 3527 RT0001)	
encouraged to move as much or professional, if I feel this is neces participating in a Mindful Living	e as little as I am comfor ssary). I assume all risk of course and while on the m, I release and dischar	or mindful movement. During such activities, I am rtable with (with prior consultation with a medical of damage or injury that may occur to me while e premises at which the class is held. In consideration rge Mindful Living and its agents from all claims	
	_	llations made up until two weeks before class start we regret that no refunds will be issued.	
I agree to this assumption of ri	sk and release.		

Today's date

Signed