

Registration Form 活動報名表格

Last Name in English		First Name in English	
Chinese Name 中文姓名			
Phone No 電話號碼 () -		Cellular 手機號碼 () -	
Address 住址			
E-Mail Address 電子郵件信箱			

Health 健康狀況

- 1 () High Blood Pressure 高血壓
- 2 () Low Blood Pressure 低血壓
- 3 () Heart and Blood vessel disease 心血管疾病
- 4 () Pregnancy 懷孕
- 5 () Dizzy 暈眩
- 6 () Osteoporosis 骨質疏鬆
- 7 () Other 其他_____

Please check the classes that you would like to register for.
(you may register for more than one class)

1. () Saturday 1:30 – 3:00pm Asana and Pranayama (online)
2. () Saturday 3:30 – 4:00pm 與悅老師有約 (瑜伽止觀 online)

Signature 簽署 : _____ Date 日期: _____