**REQUEST FOR ENROLMENT IN GENERAL CLASSES AT THE RAMAMANI IYENGAR MEMORIAL YOGA INSTITUTE (RIMYI)**

**<u>This section to be filled out by the applicant.</u>**

Last Name _____First Name_____
Middle/other name _____ Age _____ Sex: Male/Female
Address:
Street _____
County_____ Country _____
Postcode_____
Contact Nos.
Country code _____ area code _____ Number _____ Fax _____
Email address _____

No. of years practising Iyengar Yoga _____
Main Teacher _____
What frequency of study with them (daily, weekly, workshops) _____
Date of last class taken with the teacher _____/_____/_____
Can you speak English? Yes / No
Any previous classes or intensives at the RIMYI? Yes / No
If applicable the most recent date of attendance. Form (month/year) _____/_____ to _____/_____
Applying admission for (number as for your preference):
(put year)

| | |
|---|---|
| June | July |
| Aug | Sept |
| Oct | Nov |
| Dec | Jan |

**The deposit of $US150.00 currency made out to RIMYI in the form of a bank draft/cheque or international money order (do not send cash). No group booking.**
The amount sent $_____ Signature _____
Date: _____/_____/_____

**<u>The following is to be filled by the referring certified teacher.</u>**

Dear Mr Pandurang Rao,

I, …….. herewith recommend …… ……who has studied yoga with me for …… years. She/He has also attended …… courses with senior teachers.

As per my knowledge, she/he is a genuine pupil/teacher who follows the Iyengar method.

Yours sincerely …….. Date: ……/……/……