



cloud nine yoga
studio & school
representing heaven on earth since 1995

Gathering of the Goddess: Desert Hot Springs, CA

With Erika Faith Calig & Friends of Cloud Nine Yoga
May 8 - 11, 2014 at Lido Palms Resort & Spa

Registration Information & Agreement Form

Please READ and fill out this form COMPLETELY to register. Include your initials in the designated areas, make a copy for yourself and mail the ORIGINAL, along with your payment to: Cloud Nine Yoga, c/o Erika Faith Calig, 45851 Palmetto Way, Temecula, CA 92592

NAME: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____
(The one you use most) (The one you check most)

EMERGENCY CONTACT NAME: _____

PHONE: _____
(Not traveling with you)

Payment Options:

(Please ✓ at least one)

- A. \$1375.00 (private room, 1 person – 1 king bed single – room to yourself)
- B. \$1025 (double room, 2 people – 2 full beds shared room – per person)
- C. \$850 (double room, 2 people - 1 king bed shared room – per person)
- D. \$600 (quad room, 4 people – 2 full beds shared room – per person)

_____ (Please initial): I understand that I am responsible for on time arrival on Thursday, May 8th by 5:00 pm. I am aware that all classes, room and meals are based on arrival at this time and departure on May 11th by 11:00 am. I will cover additional costs incurred such as transportation, conscious boutique purchases, elixir/tonic bar treats, and spa services.

Payment method:

Cash Money Order Check I would like to use a credit card.*

~ If you are writing a check or money order, please make it payable to Cloud Nine Yoga.

~ * If you are paying by credit card, please go to: <https://squareup.com/market/erika-calig/retreat-gathering-of-the-goddess>

Refunds: All balances are due on or before May 1, 2014. No refunds after May 1, 2014.

_____ (Initial please) I understand the payment and refund policy above.



OTHER PERTINENT INFO:

As a student of Cloud Nine Yoga LLC, you will receive a Yoga Weekend Retreat that requires participation, study and practice. This retreat fulfills both 200-hr and 300-hr retreat requirements for Cloud Nine Yoga and is open to all enrollees of our Yoga Training Programs.

*Please check with your doctor if you have any health concerns connected to your participation in this retreat. It is your responsibility to be proactive about the health and safety of your body temple. **Make sure you have all necessary medications with you.***

** Let us know about any dietary restrictions, allergies, health conditions or special needs you may have (use other side, if needed):*

ASSUMPTION OF RISK

I am aware that participation in this retreat may include hazardous activity. I acknowledge that a certain minimum level of physical health, strength, fitness, and flexibility will be required. I am voluntarily participating in these activities with knowledge of the risks of injury for which I will voluntarily assume.

LIABILITY RELEASE:

As consideration for being permitted to participate in Cloud Nine Yoga’s Gathering of the Goddess Retreat, I hereby release Erika Faith and Rebecca Taylor, Arezo Tehranirad, Lido Palms Resort, Kim Hartz, and Cloud Nine Yoga, LLC from any responsibility having to do with my personal health and physical safety during the weekend of May 8 - 11, 2014.

I hereby agree that I, myself, my assignees, heirs, guardians and legal representatives will not claim against, sue or attach the property of Erika Faith or Rebecca Taylor, Arezo Tehranirad, Lido Palms Resort, Kim Hartz, and/or Cloud Nine Yoga, LLC for injury or damage resulting from my participation on this retreat. I also understand that I cannot hold any one responsible for my personal health, nor mental, emotional or spiritual well being on this trip. I accept that the Cloud Nine Yoga teachers have done everything, within their abilities, to make my experience as pleasurable as possible. I will do my part in positively participating with the group activities and show cooperation & respect to fellow retreat attendees. *I acknowledge that I am not obligated to participate in any or all of the activities or meals provided -- but my fees will be surrendered for the planned activities and meals.* Cloud Nine Yoga reserves the right to adjust accommodations as needed. I understand that, due to the nature of group retreats and circumstances beyond our control, schedules and venues are subject to change without notice. As a good student of Yoga, I will do my best to “go with the flow” and be flexible.

I acknowledge that I have read the LIABILITY RELEASE above and agree to the terms outlined in this entire document. I am aware and agree that it is a complete release of liability voluntarily assumed for my participation in the Gathering of the Goddess Retreat from May 8 -11, 2014.

Signature

Printed Name

Date

** If there are any additional comments or questions you would like to address (such as roommate requests or other arrangements), please write them here, or use other side of this form if more space is required):*

Please make a copy of this form for yourself before mailing.