

Kids Yoga at GWE Grades 3, 4, & 5

Wednesday Afternoons September 6 – December 13, 2023



This **fun yoga program** helps children be more aware of their bodies and minds through movement and play. We use creative games, breath work & mindfulness tools to regulate our emotions, calm our minds, and feel confident in our bodies. We also practice partner and group activities to improve team building & social skills.

Grades 3, 4 & 5 3:15pm – 4:15pm

Please have your child bring a sticky yoga mat and water bottle to class and wear comfortable clothing. Darker mat colors such as darker greens, blues or purples are suggested as they show less dirt. There will be no class when school is cancelled.

Fall Semester students receive a *FREE* yoga book! Class payment due with registration form.

Taught by Stephanie Congo – Registered Yoga Teacher. Leading engaging yoga movement, mindfulness, science based programs and outdoor activities to children, youth and adults for over 20 years. www.stephaniecongo.com stephanielovesyoga@gmail.com (901) 573-4522

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To register, please fill out and return the following 2 pages and bring all cash, cashier's check and money order payments to the front office. No other payments are accepted. Thank you!

Please keep this page for your information.

Kids Yoga at GWE Grades 3, 4 & 5 Fall 2023 Registration Form

Student Name(s): _____

Age(s): _____ Grade(s) and Teacher(s): _____

What is their prior yoga experience? _____

Guardian Contact Name(s): _____

Guardian Phone(s): _____

Guardian Email(s) _____

Emergency Guardian or Contact Name, Title & Best Phone Number:

Please circle the first class and/or the fall semester that you are registering your child for.

Fall Semester Starts!
September 6 – December 14, 2023

Not sure? Try a Trial Class!
September 6 or 13, 2023

Payment total. \$245 / Fall Semester, includes a kids yoga book.

_____ kids x \$245 = _____

Let your child(ren) try out the first class for \$10 on September 6th.

_____ kids x \$10 = _____

Please circle your Payment option. N/A Cashier's Check Cash Money Order

List date that Payment & Form were dropped off to the Front Office. _____

Cashier's Check made out to: "Grahamwood Elementary School" with memo "Childs Name(s)"

Cash placed in an envelope and given to: the Front Office or Ms. Owens with the Registration Form

Money Order made out to: "Grahamwood Elementary School" with memo "Childs Name(s)"

Stephanie Congo, BS, ERYT200, RYT500, CYT, EEMCLP

Kids Yoga, Yoga Therapy, Meditation, Mindfulness & Energy Medicine

692 South Belvedere Blvd Memphis, TN 38104 (901) 573-4522

Yoga for Sports Teams ♥ Large Groups ♥ Private Sessions ♥ Workshops ♥ Workplace Trainings

Kids Yoga Liability Waiver and Release Agreement

I, _____, (on behalf of my child(ren)) understand that yoga includes physical movements as well as an opportunity for relaxation, stress re-education and relief of muscular tension. As is the case with any physical activity, the risk of injury, even serious or disabling, is always present and cannot be entirely eliminated. I will discuss this with my child(ren) that if they experience any pain or discomfort, they will do their best to listen to their bodies, discontinue the activity, and ask for support from the instructor. They will follow instructions from the instructor so that they can learn safe ways to participate in class. I assume full responsibility for any and all damages, which may incur through participation.

Yoga is not a substitute for medical attention, examination, diagnosis or treatment. Yoga is not recommended and is not safe under certain medical conditions. By signing, I affirm that a licensed physician has verified my child(ren)'s good health and physical condition to participate in such a fitness program. In addition, I will make the instructor aware of any medical conditions or physical limitations before class. I also affirm that I alone am responsible to decide whether my child(ren) practice(s) yoga and their participation is at my own risk. I hereby agree to irrevocably release and waive any claims that I have now or may have hereafter against Stephanie Congo or Immaculate Conception Cathedral School.

I have read and fully understand and agree to the above terms of this Liability Waiver and Release Agreement. I am signing this agreement voluntarily and recognize that my signature serves as complete and unconditional release of all liability to the greatest extent allowed by law in the State of Tennessee.

On behalf of my Child(ren):

Guardian Signature:

Today's Date:
