



east clare yoga centre

## Booking Form

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

Telephone: \_\_\_\_\_

**Which Yoga Event do you wish to book?**

Dates: \_\_\_\_\_ Teacher: \_\_\_\_\_

**Accommodation (please tick)**

Double Room Sharing       Double Room Single       Twin Room Sharing

Four-Bedded Room Sharing

**If you have special dietary requirements please provide details below:**

\_\_\_\_\_

**Deposit (please tick)**

€25 One Day Workshop       €75 Yoga Weekend       €100 Yoga Holiday

**Selected form of Payment (please tick)**

Cheque Enclosed       Money Order/Bank Draft Enclosed

Please debit my Credit Card

Card Type: \_\_\_\_\_

Number: \_\_\_\_\_

Expiry Date \_\_\_\_\_

Signed: \_\_\_\_\_



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