

Smetanovo nábřeží 14 Prague 1 110 00 Czech republic

Registration Form

Surname:	Given Nan	ne:
Address:	City:	Post Code:
Mobile:	Email:	
I herewith enroll for the following o	course:	
Conducted by GYROTONIC®Pre-		re-Training Course® OTONIC®and GYROKINESIS®instructor cová
Date of the course:		at the Art of Movement Studio
Supplementary Provisions:		
 The course fee 850,- € / 21.930,-CZK to € Account Nr. 43-6692600257/0100 IB CZK Account Nr. 43-5997720247/0100 Registration will be accepted only in word in case of cancellation on the part of the line case of cancellation on the line case of cance	to be paid latest of BAN:CZ22010000 IBAN: CZ190100 Iriting and inclusing participant the he organizer the	00000435997720247 BIC:KOMBCZPPXXX ve of the registration fee. e registration fee will not be refunded.
Write your previous experiences with $\mathbf{G}\mathbf{Y}$	ROTONIC®:	
responsible for any accident that may occue exercise I may do as part of this course and such injuries or accidents.	ur or injuries that d that neither the	hysically fit and understand that I alone am may be sustained during (or because of) any e studio nor the teacher will be held liable for any its contents and I herewith accept the rules and
City, Date		Participant's Signature