

Brought to you by The Friends of the Donatucci Branch

YOGA

FALL 2010

WITH STACY PAPA

Stay up to Date! This Form is updated quarterly online at: SoulCityWorkout.com!
NOW MEETING ON THURSDAY NIGHTS!

**Classes Are Every
Tuesday and Thursday
from 6:15-7:15pm**

Free Library of Philadelphia
The Donatucci Branch
1935 Shunk Street
Philadelphia, PA 19145-4234
Phone 215-685-1755
(20th & Shunk Sts.)

Please Wear Loose,
Comfortable Clothing &
Bring your own
Exercise mat.

Call Stacy for more
information at (215) 528-9539

Yoga is for everyone! Anyone can do it and benefit from being in touch with their body!

Hatha Yoga promotes whole body fitness, whether you're a beginner or advanced practitioner. Yoga will slowly, gently and easily open up your body. You'll feel taller, breathe easier, and move about more comfortably.

Yoga is designed to work all your muscles; not just a few isolated major muscle groups. Many of the postures, such as the twists and inversions, stimulate particular internal organs or release energy from stress prone areas, including lower back and neck. Yoga is a technique ideally suited to prevent physical and mental illness and to protect the body generally, developing an inevitable sense of self-awareness and assurance.



Registration

Please bring this filled-out registration with you to the first class, along with payment. Cash or Checks Only.

- Single Class \$8
- 4 Class Card \$26
- 10 Class Card \$50
- 20 Class Card \$80

As a participant in this class, I understand that I maintain complete responsibility for receiving medical evaluation and any necessary follow-up and for reporting and potential risks that may impact my participation. *In addition, I am expected to inform the staff should any discomfort develop while participating in the classes.* By signing this form, I am signifying that I agree to the above responsibilities and that I **do not** hold the Library, its officers, agents, staff and employees for any claims of liability for injury or loss suffered as a result of my participation in these classes.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Signature: _____

Email: _____ Date: _____