



Registration request to  
RYS 250 Plus Teacher Training Course  
Yoga Alliance International  
**Quantum Biophysics Raja Yoga**

The undersigned:

- 1) Name and Surname: .....
- ..
- 2) Place and date of birth: .....
- 3) Tax code: .....
- 4) Residence: Via ..... n. .... Postal Code .....  
..... City ..... Prov. .... State.....
- 5).Tel.....Cell.....email.....

ask to be enrolled in the Vinyasa Yoga Teacher course on the dates published on the official website of the Association under the heading "RYS 250 Plus Teacher Training Course", pledging to attend the lectures and to pay the amount of the total amount established of 2200.00 Euro or in a single formula or monthly according to the established quotas. He also declares to have received the Internal Rules of the Teachers Course. (The rules and monthly fees are published on the Teachers' Course page on the [www.aljalilyoga.com](http://www.aljalilyoga.com) website)

Deposit as a deposit (which in any case is an integral part of the agreed two-year fee to which there will be no other costs to be added) the sum of Euro 300.00 or 400.00 according to the chosen payment method. A payment receipt will follow as a membership fee at the beginning of the course.

The registration fee does not include revenue stamps for tax receipts.

Pursuant to and for the purposes of Law 675/96 and subsequent ones, you consent to the processing of the data contained in this application for the institutional purposes of the Association only.

Information from the Association A.P.S. "Al Jalil Yoga" in compliance with the law 4/2013

All the lessons and treatments carried out are for the energetic rebalancing, based on the techniques and theory of Eastern philosophy, aimed at the recovery and maintenance of psychophysical well-being and as required by the statute of the association are to be considered as activities to disseminate the oriental culture in kind.

These treatments are not and cannot be considered therapeutic in any way as the operator:

- Does not consider, does not treat and does not have as its objective the resolution of pathologies and symptoms that are strictly pertinent to medical health
- Does not consider his intervention substitutive to that of the doctor
- Does not provide the recipient with similar pharmacological or therapeutic prescriptions (herbal, homeopathic preparations, etc.)

Date:

Signature:

To be completed, signed and sent to [aljalilyoga@gmail.com](mailto:aljalilyoga@gmail.com). The registration will be valid and following the payment of the registration fee.