



Montville Recreation Department's

YOGA CLASSES



WHO: Adults—All are welcome. No prior experience necessary.

WHAT: Energize your body as you stretch and strengthen major muscle groups. Sun Salutation is a yoga practice that involves a series of Body Postures. Sun Salutation along with other Postures is the rhythm of the body, melody of the mind and harmony of the soul. Small classes with personalized instruction.

WHERE: Library Pio Costa Auditorium, 90 Horseneck Road in Montville

WHEN:

<u>Session</u>	<u>Day</u>	<u>Dates</u>	<u>Time</u>	<u>Cost</u>
1	Mondays	Jan 9, 30, Feb 6, 13, March 6, 13 & 27 (No: 1/16, 1/23, 2/20, 2/27 & 3/20) - 7 classes	9:15am to 10:15am	\$50.00
2	Wednesdays	Jan 4, 11, 18, 25, Feb 1, 8, 15, 22, March 1, 8, 15, 22 & 29 13 classes	9:15am to 10:15am	\$80.00
3	Mon & Wed	Mon: Jan 9-March 27 (No: 1/16, 1/23, 2/20, 2/27 & 3/20) <u>AND</u> Wed: Jan 4-March 29 - 20 classes	9:15am to 10:15am	\$115.00

INSTRUCTOR: Rama Jonnalagadda, Certified Yoga Instructor
(If needed—Substitute: Vani Gudiseva, Certified Yoga Instructor)

FEE: See Chart Above.— **You must be pre-registered to participate! NO DROP-INS allowed!**
NOTE: There will be a \$5.00 processing fee for program refunds!

PAYABLE TO: Montville Recreation, 195 Change Bridge Road, Montville 07045

REGISTRATION PROCEDURE:

1. In Person 2. Mail 3. On-Line OR 4. Payment Drop Box in Municipal Building's Parking Lot
Checks or Cash Only for In-Person Registration OR Checks Only for Mail or Payment Drop Box!!!
OR Credit Cards for On-Line Registration!

Please Note: You will be charged a 3 % convenience fee for credit card use on-line!
For On-Line Registration !!! Go to the town's website at: <http://www.montvillenj.org/RecRegistration>
For additional Recreation Flyers go to: <http://www.montvillenj.org/RecFlyers>

QUESTIONS ???? Call Recreation: 973-331-3305 OR visit our website at: www.montvillenj.org

YOGA CLASSES for Adults - Winter 2017

NAME _____ BIRTHDATE _____ AGE _____

ADDRESS _____ TOWN _____ PHONE _____ CELL _____

EMERGENCY NAME & NUMBER _____

EMAIL (Please distinguish b/w letters & numbers!) _____

PLEASE CIRCLE CLASS CHOICE:

1—Mondays or 2—Wednesdays or 3—BOTH Monday & Wednesday

Please list any special needs that you may have that will assist us in providing a successful program:

I understand that the Recreation Department DOES NOT provide accident insurance.

PARTICIPANT SIGNATURE _____ DATE _____

FOR OFFICE USE (12/7): Fee Paid _____ Cash _____ Check _____ Date _____ Received By _____ **Program # 822**