To fill out this form, please save this form to your computer and use the free Adobe Acrobat Reader DC app to fill it out. If you do not have this app on your computer, please download it free from here: https://acrobat.adobe.com/us/en/acrobat/pdf-reader.html



## Enrollment Form for Initiation into Babaji's Kriya Yoga

(Kriya Kundalini Pranayama and Meditation)

Proposed Place:	Country:	Date:
Name:	Gender:	Date of birth:
Full Address:		
Telephone:	Email:	
(Your information is kept strictly confidential and related to Babaji's Kriya Yoga, phone only if req		
Initiation into Kriya Yoga means to receive one's fareveal them. Confidentiality of the techniques is re		
While no prior experience with Yoga is required facilitate evaluation of your aspiration and readi co-operate with the legal requirements and read, o	iness for initiation into Kriya Yoga. To a	low us to make this seminar available to you, pl
Why do you want to be initiated into Babaji's	Kriya Yoga?	
What do you <i>love most</i> in this world now?		
What are your favorite books in spirituality/philo	osophy/metaphysics?	
Have you been initiated into another Yoga lineag	ge before? When/where/by whom? If so,	do you continue to practise these techniques?
Have you already been initiated into Yoga or Bai	baji 's Kriya Yoga $\square$ 1 <sup>st</sup> / $\square$ 2 <sup>nd</sup> / $\square$ 3 <sup>rd</sup>	initiation? When/where/by whom?
Are you prepared to practise regularly and faithf	fully the techniques taught in this initiation	on?  Yes   If not, why:
Are you <i>currently</i> having any significant <i>health</i> p	problems (e.g. high blood pressure), which	ch might restrict your practice of the postures?
Are you currently taking any <i>medication</i> or psycl	hiatric drugs?   Yes     Not anymore	☐ I never did. If so, which:
I agree to take full responsibility for my own well and in managing unpredictable circumstances, ar its local representatives for this seminar, includin	nd hence to waive any claims of liability	, as per normal standards, against the organizer
Confidentiality: In accordance with this ancient to content of this teaching and not to reveal to othe which I will be initiated, and which are given spe	rs or teach without authorization of the	lineage holder the advanced Kriya techniques,
Place & Date		Signature

Please send your fully completed and signed enrolment form and the required deposit to Vidhyananda (Sherry Ryan), 168 Main St., Ashaway, RI 02804, with a deposit of \$50 payable to "Sherry Ryan". We reserve the right of admission and will confirm your registration. Complete attendance of the program is mandatory, except for repeaters. Your deposit will be returned if the seminar is canceled, or you are not accepted, or prevented by unavoidable circumstances from attending. If you have any questions, please feel free to call Vidhyananda, tel. 1 401 751 2050 or Email: <a href="mailto:sherry@providencehealingarts.com">sherry@providencehealingarts.com</a>. International: info@babajiskriyayoga.net. International Website: <a href="mailto:babajiskriyayoga.net">babajiskriyayoga.net</a>

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