OASIS Albuquerque Registration Form

To register for OASIS programs, complete this form and mail, fax or deliver it with your payment to:

Albuquerque OASIS
3301 Menaul Blvd NE
Suite 18
Albuquerque, NM 87107
Fax #:(505) 884-4942

Name _____

Phone _____

Address_____

City _____ Zip _____

Email _____

May we email your registration receipt? __Yes __No

Please Print

Class #	Class Title	Fee	Office use

There are no refunds unless OASIS cancels the class.	Subtotal of fees	$
__Check __Cash __Visa __Mastercard __Discover	Trimester processing fee	**+ $10.00**
Credit card #_____	Tax-deductible gift to OASIS	$
Exp. date ____/_____		
Signature _____	Total amount	$

Waiver of Liability: I release and discharge OASIS and all other sponsors, supporters and agents and persons acting for and on behalf of such entities from all claims or damages, demands or actions whatsoever in any manner related to or growing out of my participation in programs sponsored by OASIS and/or any sponsors. Including but not limited to: educational, cultural, volunteer, physical fitness related programs and travel in any form. I attest and verify that I have full knowledge of the risk involved in physical fitness activities and that I have obtained approval from my physician to participate in same.
I understand that the OASIS mailing list may be used by OASIS sponsors for educational mailings. I understand that participants in OASIS programs are expected to conduct themselves in a courteous manner, respecting the rights of all other participants, volunteers and staff.
Media Release: I give permission for The OASIS Institute to photograph or videotape me and to use my name, and image in OASIS materials and publicity. I authorize the use of my name and image in publications produced by The OASIS Institute's partners and by the media. I agree to be photographed or videotaped by the media for general publication.

By (Signature): _____ Date: _____