

WYAB - WORLD YOGA ACCREDITATION BOARD RENEWAL FORM CATEGORY WYAB Goodwill

All prospective members of WORLD YOGA ACCREDITATION BOARD-(wyab) is required to complete this registration form. Indicate any changes; Membership runs from round the year. **NEW MEMBERSHIP RENEWAL Changes for directory?**

SECTION I: MEMBER CONTACT INFORMATION

TITLE	🗌 Dr	🛛 Mr	🗌 Mrs	🗆 Miss	🗆 Prof 🛛 Ms
Name of Individual					
Organization's Name					
Position/ Assignment					Work Phone (If Unique)
Address I					Principle Phone
Address 2					Home Phone
Town/City					Whatsapp
Postal Division					Essential Email
Country:					Auxiliary Email
*Star the e-mail and phone number you would like listed in the directory					

SECTION 2: MEMBERSHIP TYPE AND PAYMENT DETAILS

MEMBER TYPE	DESCRIPTION	MEMBERSHIP DUES (Annual)	Please Check	
Provisional ACCREDITATION BOARD	Admission Fee (One Time)	\$300		Paste a
Provisional ACCREDITATION BOARD	Annual Fee (Every Year Would be Charged)	\$		Passport Size Photo here
PER MANDAY RATE OF AUDIT(Separate Quotation Will Be Send)		\$250/ Manday		
Payment mode	🗌 Online Payment 🗋 Pay Pal 🗋 Western Union 🗋 Others			

SECTION 3: MEMBER INFORMATION

OCCUPATION /INFORMATION/JOB TITLE:

Member WYAB: Yes 🗌 No 🗍 Would you like to receive WYAB /lt's Sister Organs membership information?: Yes 🗌 No 🔲

Please indicate if you would be willing to serve on a chapter/committee etc.:

Yes Not at this time

Is there any interest specific area/committee you would like to serve on?

(Committees/Positions/WYAB / It's Sister Organs are listed at http://www.Worldyoga.us/WYAB sisterorgans.html)

Permission to use photographic images:

Photographs of WYAB members may be used in various WYAB communications incl. the newsletter and website. Group
photographs taken at WYAB events may be used without identifying individual members. For individual photographs, please
indicate your permission for use:
VALXAR ///// Sister Overse have my commission to use and identify shotographs of mo

_WYAB /lt's Sister Organs have my permission to use and identify photographs of me.

__ WYAB /lt's Sister Organs does not have permission to use and identify photographs of me.

____ WYAB /It's Sister Organs must contact me before using any identified photographs of me in WYAB

communications.

All disputes relating to membership, WYAB, services/privileges, issue of Identity Cards, Certificates and etc. are governed by Civil Laws and Civil Courts only subject to Mumbai, (India) Jurisdiction.

Declaration: I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/We undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I/We aware that I/We may be held liable for it. I/We hereby authorize sharing of the information furnished on this form with the **WYAB**.

Date:

Signature:

To pay online: The Membership Fee in favour of "**WYAB**" or You can Transfer the Amount through Bank directly in A/C NO. 12950200000891, **Bank Name:** Indian Overseas Bank, Mumbai. **SWIFT Code:** IOBAINBB089.**Ifsc Code:**, IOBA0001295 **Whatsapp.:** +91-8275879725

Regardless of payment method used, please form to be send at info@worldyoga.us . fill your details in and make sure to send a copy of your - mail, which includes, name, address, tel, fax, epayment transfer receipt/-mail and Whatsapp Number. Payment received e-slip along with membership will be updated at WYAB after 48 hrs.