

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	□ M r	🗆 Mrs	🗆 Miss	🗆 Pro	of 🛛 🗆 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)	\$1300		Paste a
Provisional ACCREDITATION BOARD	Annual Fee (Every Year Would be Charged)	\$300		Passport Size Photo here
PER MANDAY RATE OF AUDIT(Separate Quotation Will Be Send)		\$50 / 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 (Drgans membership information?: Yes 🔲 No 🔲
Name of Registering Authority of your Training Centre:	Registered on Dated:
How many registered Players/members in your Training Centre:	
What is your main objectives of your Training Centre:	
Please indicate if you would be willing to serve on a chapter/com Serve on a chapter/com Serve on a chapter/com Serve on a chapter/com	
Is there any interest specific area/committee you would like to serve	e 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 WY.	AB communications incl. the newsletter and website. Group
photographs taken at WYAB events may be used without ide indicate your permission for use:	ntifying individual members. For individual photographs, please
WYAB /It's Sister Organs have my permission to use	and identify photographs of me.
WYAB /It's Sister Organs does not have permission to	
WYAB /lt's Sister Organs must contact me before usi	, , , , , , , , , , , , , , , , , , , ,
communications.	
Declaration: I/We hereby declare that the details furnished above are true and correct to the b	es and etc. are governed by Civil Laws and Civil Courts only subject to Mumbai,(India) Jurisdiction. est of my/our knowledge and belief and I/We undertake to inform you of any changes therein, or misrepresenting, I/We aware that I/We may be held liable for it. I/We hereby authorize sharing o
Date:	Signature:

To pay online: The Membership Fee in favor 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:, IOBA 0001295 Whatsapp.: +91-8275879725

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