



## 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 complies with general data protection/GDPR. Email is used only for information directly related to Babaji's Kriya Yoga, phone only if required for seminar coordination, address and date of birth only for unique identification.)*

*Initiation into Kriya Yoga means to receive one's first experience with the techniques involved from someone who has been authorized to reliably reveal them. Confidentiality of the techniques is required to ensure that they will not be passed on to others in a modified or incomplete form.*

*While no prior experience with Yoga is required, your response to these questions is required for your admission to the initiation, as it will facilitate evaluation of your aspiration and readiness for initiation into Kriya Yoga. To allow us to make this seminar available to you, please co-operate with the legal requirements and read, complete and sign this form fully. Thank you!*

### Why do you want to be initiated into Babaji's Kriya Yoga?

What do you *love most* in this world now?

What are your favorite books in spirituality/philosophy/metaphysics?

Have you been initiated into *another Yoga lineage* before? When/where/by whom? If so, do you continue to practise these techniques?

Have you already been initiated into Yoga or Babaji's Kriya Yoga ☐ 1<sup>st</sup> / ☐ 2<sup>nd</sup> / ☐ 3<sup>rd</sup> initiation? When/where/by whom?

Are you prepared to *practise regularly* and faithfully the techniques taught in this initiation? ☐ Yes | If not, why:

Are you *currently* having any significant *health problems* (e.g. high blood pressure), which might restrict your practice of the postures?

Are you currently taking any *medication* or psychiatric drugs? ☐ Yes | ☐ Not anymore | ☐ I never did. If so, which:

I agree to take full responsibility for my own well-being and health, my experiences and interactions with others during and after this seminar, and in managing unpredictable circumstances, and hence to waive any claims of liability, as per normal standards, against the organizer and its local representatives for this seminar, including teachers, the venue, and the volunteers.

Confidentiality: In accordance with this ancient tradition and with solemn promise to its fountainhead Kriya Babaji, I agree not to publish the content of this teaching and not to reveal to others or teach without authorization of the lineage holder the advanced *Kriya* techniques, into which I will be initiated, and which are given specifically to me and only for my own personal and private use.

Place & Date

Signature

*Please send your fully completed and signed enrolment form and the required deposit to Ramdas (Armound Mahmoudi), 433 Lloyd Ave, Providence, RI 02906, with a deposit of \$50 payable to "Armound Mahmoudi". 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 Ramdas, tel. 1-401-808-4021 or Email: [Ramdas@babajiskriyayoga.net](mailto:Ramdas@babajiskriyayoga.net). International: [info@babajiskriyayoga.net](mailto:info@babajiskriyayoga.net). International Website: [babajiskriyayoga.net](http://babajiskriyayoga.net)*

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