

KRI Level One Payment Form
US & CANADA

Level One Program Dates: ____/____/____ to ____/____/____

City _____ State _____ Country _____

Licensee _____

Administrator _____ Yoga Center _____

Calculating KRI Licensing Fee:

of students _____ x pre-registration price of \$ _____ x 10% = \$ _____

of students _____ x full registration price of \$ _____ x 10% = \$ _____

of students _____ x discount price of \$ _____ x 10% = \$ _____

TOTAL KRI Licensing Fee: \$ _____

IKYTA Membership Dues

of students _____ x \$78 = \$ _____

TOTAL IKYTA Membership Fee: \$ _____

Payment for the KRI Licensing Fee is payable to: ***KRI***

Payment for the IKYTA Associate Membership Fee is payable to: ***3HO IKYTA***

The Student Contact List is also due at this time.

**Send both of your payments by mail to: KRI Contract Manager
PO Box 1819
Santa Cruz, NM 87567 USA**

If paying by credit card, use the KRI credit card form. Call 505-629-4089.

Initials Date