



# City of Milford, Connecticut

--Founded 1639 --

70 West River Street – Milford, CT 06460-3317

Tel 203-783-3280 Fax 203-783-3284

[www.ci.milford.ct.us](http://www.ci.milford.ct.us)

Recreation  
Department

## PRESS RELEASE

Please release ASAP and repeat until January 4, 2010

October 23, 2009

Contact: Bill Garfield  
Recreation Supervisor  
203.783.3388 – Phone  
203-783-3284 – Fax

### MILFORD RECREATION TO OFFER WINTER HATHA YOGA CLASSES

The Milford Recreation Department announces its winter Hatha Yoga sessions for adults with instructor Dee Stephens beginning on Monday, January 4, 2010. The class is available to both residents and non-residents.

Experience the peace and relaxation in your body through Yoga. Hatha Yoga gives one confidence, restores vitality, reduces stress, enhances flexibility and aids in weight control. It is a wonderful and soothing experience that enables you to feel good both inside and out.

There are four classes being offered. The first class is offered on Monday night beginning January 4 at 6:00 pm with a second class at 7:20 pm. The Tuesday class begins on January 5 at 6:15 pm while the final class is scheduled for January 6 at 9:15 am on Wednesday mornings.

The classes running for 12 weeks will cost \$60 for residents and \$65 for non-residents. All classes will be held at Margaret Eagan Center.

For more information please contact Bill Garfield at the Recreation Department 203.783.3388 or by email [bgarfield@ci.milford.ct.us](mailto:bgarfield@ci.milford.ct.us).

“Building a Community Through People, Parks, and Programs”  
The Benefits Are Endless



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## YOGA EXERCISE CLASSES – WINTER 2010

Determine your choice of class and check appropriate box below. Classes are limited in size and there are no refunds for missed classes. Class and date selection will be taken on a first come first serve basis. All classes will be held at the Margaret Egan Center.

PLEASE INDICATE YOUR CHOICE OF CLASS WITH A CIRCLE AROUND EACH CLASS NUMBER

Please make check payable to "**Milford Recreation Dept.**"

#	CLASS	LOCATION	DAYS	DATES	TIMES	INSTRUCTOR	RES.	NON RES
1	Hatha Yoga	MEC	Mon.	1/4 - 4/5	6:00 PM	Dee Stephens	\$60	\$65
2	Hatha Yoga	MEC	Mon.	1/4 - 4/5	7:20 PM	Dee Stephens	\$60	\$65
3	Hatha Yoga	MEC	Tues.	1/5 - 3/23	6:15 PM	Dee Stephens	\$60	\$65
4	Hatha Yoga	MEC	Wed.	1/6 - 3/24	9:15 AM	Dee Stephens	\$60	\$65

This is your receipt. Fee Paid: \$ \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

-----DETACH HERE-----

NAME: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ DOB: \_\_\_\_\_

CITY/ZIP: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

### **PLEASE READ THE FOLLOWING STATEMENT AND SIGN BELOW**

*By my signature, I do hereby assume all risks of personal injury involved in this activity. I do hereby release the City of Milford, the Recreation Department, the instructors and agents of liability and suits at law or in equity resulting from this activity.*

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

#	CLASS	PAYMENT	INITIAL