

Registration Form

Porto Rafael, Sardinia Island, Italy | 19-25 October 2025

Personal Details

Full Name and Surname:

Physical address:

E-mail address:

Phone number:

Date of Birth:

Contact person and his/her phone no:

Doctor's (GP) name and contact no:

Where did you hear about the retreat?

Do you have any dietary requirements?

Have you done yoga before if so, what kind?

Medical Information

Please note that this information is confidential and will not be passed on to third parties. It enables us to support your health, safety and well-being.

All medical concerns & issues must be detailed for us to be able to honour your booking, so that we can support your safety and well-being. Please take a moment to answer the following questions:

Do you have high or low blood pressure?

Do you have any known heart condition?

Are you pregnant?

Are you taking any prescription meds?

Are there any other situations/circumstances we need to be aware of?

Are you recovering from any conditions and/or dis-eases including addictions, anorexia, depression or other emotional conditions?

Have you had any recent injuries or operations?

Are you experiencing pain/discomfort in your body?

Have you got any allergies?

Please give all relevant, additional details below:

Cancellation Policy

Cancellations up until 12 months prior to Retreat start are refunded in full, less the deposit. Cancellations made between less than 12 and 10 months prior to Retreat start are refunded by 60%, less the deposit. For cancellations less than 10 months before retreat start, no refund is given unless we can fill your place. Should the Villa not be accessible due to Covid related matters, you will be offered a new retreat date and your payments will be transferred over to the new date. There will be no discounts or refunds for late arrivals, early departures, travel delays, illness, flight cancellations, unattended classes, or losses incurred due to natural disasters, pandemics or attacks. Please ensure you have appropriate insurance cover in place to cover yourself against any of these eventualities. In the unlikely event of the retreat been cancelled by Imken Donde for any other reason, your payment made to Imken Donde up until then will be refunded in full. Any other costs such as flights, car hire or other are not refunded.

Payment

A non-refundable deposit of €890 is required to confirm your place upon booking. The balance remainder is to be paid 7 months prior to retreat by 19 March 2025. Bookings thereafter to be paid in full at time of booking. Payment can be made by transferring to the below bank account. Kindly ensure transfers are done in Euros and transfer charges are covered by you.

Split payments are possible in some cases/ circumstances. Please ask so we can arrange what mutually works.

Bank Transfer:

Imken Donde

NORDEA Bank

Bank account number: 9960 4221168406 Bankgiro:121-3206

IBAN: SE65 9500 0099 6042 2116 8406

SWIFT (BIC): NDEASESS

Swish number: 1230105791

Booking Terms

Please ensure that you agree with the Booking Terms below:

I have taken out personal travel insurance inclusive of Covid cover for the duration of my stay. My travel insurance details:

I have detailed above any known medical or physical concerns for myself. I herewith confirm that I am physically and mentally fit to undertake this retreat and that it is my responsibility to take care of my health and well being.

I agree to be solely liable for any damages that I inflict on myself, on others, or on any objects.

I will assume full responsibility for the loss or damage of personal belongings.

I have read, understand and accept the conditions of payment and cancellation.

Name:

Date:

Contact details

Email hello@imkendonde.com **Phone/WhatsApp** +46 76 0726670 **Facebook** Imken Yoga

We very much look forward to be hosting you and sharing with you what will be a special week of deep relaxation and fun!