

## Mindful Movements Children get their own mats to keep! 8 class session



It's hard to be a child today! Children deal with many distractions, temptations, overstimulation, and peer pressure. With Mindful Movements we combine playful laughter & a sense of adventure so children can learn basic flexibility, coordination, body awareness & confidence. If they are feeling anxious about talking in front of the class or having trouble focusing on their homework, children will unconsciously call upon the techniques taught to them in Mindful Movements.

## Benefits

- Increases Strength and Flexibility
- Develops Strong, Limber and Healthy Bodies
- Helps them Relax, Unwind, and Calm Themselves
- Alter millions
- Fosters Creative Expression and Imagination
- Helps them Improve Their Focus,
   Concentration, Attention Span, and
   Balance
- Cultivates Self-Esteem and Confidence, Setting Patterns of Success and Achievement

- Promotes a Healthy, Active Lifestyle
- Helps them Discover a Sense of Awareness and Respect for Themselves, Others, and The World Around Them
- Improves Their Gross and Fine Motor Skills
- Reduces Stress
- Helps them Sleep Better
- Improves Their Digestion
- Gives them an Alternative to Tuning
   Out Through Constant Attachment to
   Electronic Devices



For more information, please contact: Gina Misticawi @ 404-216-4488 or

amisticawi@amail.com



## **Registration Form**

| Name of Child:                                                              |                                                  |                                                |                                                                                                                                                                    | _M ( ) F ( )                         |
|-----------------------------------------------------------------------------|--------------------------------------------------|------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|
| Date of Birth:                                                              | Age:                                             | Class:                                         |                                                                                                                                                                    | _ , , , ,                            |
| Name of Parent/Guardian:                                                    |                                                  |                                                |                                                                                                                                                                    |                                      |
| Address:                                                                    |                                                  |                                                |                                                                                                                                                                    |                                      |
|                                                                             |                                                  |                                                |                                                                                                                                                                    |                                      |
| Email:                                                                      |                                                  | Phone:                                         |                                                                                                                                                                    |                                      |
| Is the child currently experiencing Please specify here:                    | g any medical conditi                            | ions (asthma, epile                            | epsy, etc.) that must be known by t                                                                                                                                | he instructor?                       |
| If the child is currently taking me list here:                              | dications or has serio                           | ous allergies that s                           | should be known in case of an emer                                                                                                                                 | gency, please                        |
| • • • •                                                                     | Om Ma Mia Fitness , LLC                          |                                                | \$175.00. This includes a registration fee                                                                                                                         |                                      |
| includes your child's personal mat. Yo                                      | ou may join at any time.                         | . First payment will be                        | e pro-rated if you sign up during the sess                                                                                                                         | SION.                                |
|                                                                             | <u>Term</u>                                      | s and Conditio                                 | <u>ns</u>                                                                                                                                                          |                                      |
| Fitness, LLC, and the hosting facility authorize that pictures may be taken | , from all actions, clair during the sessions to | ns or injuries resulti<br>prepare small souver | release and discharge Gina Misticawi, or ing from my child's participation in the nirs for the children, parents, school, ar he undersigned, have read and accepte | nis activity. I<br>nd possibly to be |
| Parent/Guardian                                                             |                                                  | Signature                                      | Date                                                                                                                                                               |                                      |
|                                                                             |                                                  |                                                | _                                                                                                                                                                  |                                      |

## **About the Instructor**

Gina Misticawi is an E-RYT 200 (Experienced Registered Yoga Teacher) and RCYT (Registered Children's Yoga Teacher) with Yoga Alliance. She has been helping others as a Personal Trainer/Fitness Counselor and Group Exercise Instructor since 1997. After having children and realizing the number of stressors placed upon them, she became a Certified Elevated Grounded Teacher to teach children yoga. She also became certified through Little Mindful Yogis. She teaches children at Buckhead Prep, Findley Oaks, and the Atlanta Athletic Club. She teaches big people at the Atlanta Athletic Club, Mary Our Queen and Burn Bootcamp. Gina and her family are parishioners at All Saints Catholic Church and Mary Our Queen.







