



SHAKTI Vinyasa Yoga 200 Hour Teacher Training Application

Today's Date:		Date of Birth:		Sex:	
Name:					
Street Address:					
City:		State:		Zip:	
Home Phone:		Cell Phone:			
Email Address:					
Occupation:					
Emergency Contact Name:		Emergency Contact Number:			

Medical History: Please complete the medical history section below so that we can be sure to respond to any emergencies should they arise during your training. Please include a second sheet if necessary. Based on your specific history, we may schedule a follow-up interview before accepting you in the program.

1.	How would you evaluate your current physical and mental health? <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Unstable
2.	Please describe any physical or mental challenges:
3.	Please describe any injuries or medical conditions that may affect your ability to fully participate in the training:
4.	Have you had any surgeries in the last year? If the answer is yes, please explain:

About You: To better serve you, it is important that we have a general picture of your yoga practice and history. Please be honest and clear so we can learn about you.

1.	How long have you been practicing yoga?
2.	How many days per week do you practice yoga?
3.	What style(s) of yoga do you usually practice, what is your primary style?
4.	At which yoga studio(s) do you currently practice?
5.	Do you have a home practice? If so, how often?
6.	Who have been your primary yoga teachers, both past and present?
Please provide us with the name, phone number and email of one professional yoga reference.	
Reference Name:	
Phone Number:	
Email Address:	
7.	What area of yoga challenges you the most? Physically, mentally, emotionally, spiritually?
8.	How has yoga changed your life?
9.	Is this your first yoga training? If no, please list all prior yoga trainings:
10.	Are you currently teaching yoga? If yes, for how many years have you been teaching? Where do you currently teach?

11.	In your opinion, what qualities embody an excellent and effective yoga teacher? Why?
12.	Why do you want to take this Teacher Training program at SHAKTI Vinyasa Yoga?
13.	What are your expectations for this training? What do you hope to achieve at the completion of the program?
14.	What is your intention for teaching and where do you intend to teach in the future?
15.	How did you first learn about the SHAKTI Teacher Training program?

PAYMENT INFORMATION

A \$500 non-refundable application fee is due with your application. Please submit your \$500 application fee through our online store.

Full program payment or a signed payment plan agreement are required no later than 9/4/15. To be eligible for early registration pricing, payment is due in full by the early registration date (7/1/15).

PROGRAM COST

Costs below include the \$500 application fee

Early Registration: \$3200 (*payment due in full before 7/1/15*)

Standard: \$3500

Payment plans available. All payment plans require an auto debited payments.

I understand that if I fulfill all the requirements of the SHAKTI Teacher Training, including in-class hours, homework, quizzes and passing both the written and in-class final exams, I will receive a letter of completion, which can be submitted to the Yoga Alliance or a prospective employer as evidence that I have completed a 200-hour Teacher Training program. Paying for the program and completing the hours alone does not mean I will pass the program. We expect all students to show up consistently 100% and fully participate.

I understand that SHAKTI reserves the right to ask me to leave the program if I am found plagiarizing, if my behavior is inappropriate, unethical or violates the Yoga Alliance ethical guidelines. Under such circumstances I understand I will not be refunded my tuition.

I understand that SHAKTI reserves the right at any time to ask me to leave the training if it appears that

my health or physical practice is not at the level to fully participate in the training. Under such circumstances I understand I may be given a prorated refund, based on the amount of time I have attended in the training while the deposit is still non-refundable.

CANCELLATION POLICY:

Upon acceptance to the program, the \$500 application fee is non-refundable. If I cancel prior to August 1, 2015 I will forfeit the \$500 application fee but have the remaining tuition refunded. If I cancel within 14 days before the start of the training, I will forfeit my \$500 deposit and 50% balance. Once the program begins, tuition is non-refundable and non-transferable.

I understand that all SHAKTI Teacher Training materials are under copyright protection and cannot be reproduced by me without the permission of the author. Failure to comply may result in legal action.

ASSUMPTION OF RISK, HEALTH WARRANTY, AND RELEASE OF LIABILITY WAIVER

Yoga is an individual experience and I understand that I should progress at my own pace while participating in the physically active portions of the SHAKTI 200-Hour Teacher Training Program. If at any point I feel injury, overexertion, or fatigue, I will respect my own body's limitations and I will rest before continuing Yoga or any other exercise. I will take care of my body and do my best to remain healthy.

I acknowledge that participation in the SHAKTI 200-Hour Teacher Training Program naturally involves the possibility and risk of injury to me. I further acknowledge that specific risks include injuries resulting from over-exertion, physical adjustment, improper or negligent use of equipment, failure to follow trainer instructions, or injuries resulting from participation in an inappropriate level of physical exercise. As such, I understand and voluntarily accept these risks.

I represent that I am in good health, at least 18 years of age, have the necessary current medical approval to engage in physical exercise and yoga instructional classes and teacher training and have no disability, impairment, injury, disease or ailment which would cause risk of injury or adverse health consequences as a result of engaging in physical exercise and yoga instructional classes and teacher training. I acknowledge that to the facility where I am taking my training and SHAKTI Vinyasa Yoga are relying on this representation and I understand that neither to the facility where I am taking my training nor SHAKTI will investigate or certify my health or my fitness to participate in physical exercise and yoga instructional classes and teacher training.

RELEASE AND WAIVER OF LIABILITY: In consideration for my participation in SHAKTI Vinyasa Yoga 200-Hour Teacher Training Program, I, individually, and on behalf of my relatives, legal representatives, and assigns, agree not to sue and hereby agree to defend, indemnify, release and hold harmless to the facilities where I am taking my training and SHAKTI Vinyasa Yoga LLC, all SHAKTI Teacher Training staff, and each of their respective shareholders, owners, officers, directors, members, employees, contractors and agents, and the owner of the facilities (the "Facilities") where the 200-Hour Teacher Training Program occurs (collectively, the "Releases") from all actions, claims, demands, suits, losses, liabilities, charges, expenses (including, without limitation, attorneys' fees), and costs of any nature whatsoever which may arise out of, relate to, or result from, any injury, economic loss or any damage to me or my guest or relatives resulting from my participation in physical exercise and yoga instructional classes and

teacher training at the Facilities, entry to or use of the equipment, facilities or services at the Facilities, the negligence of to the facility where I am taking my training or SHAKT, anyone at to the facility where I am taking my training or SHAKTI behalf or anyone using the Facilities or SHAKTI equipment, facilities or services, except such as may arise out of the gross negligence or willful misconduct of the Releases. This release and waiver of liability (this "Release") is intended to be a complete release of any responsibility for personal injuries and/or property loss/damage sustained by me while at the Facilities, whether using exercise equipment, participating in active or passive exercise, or not. I understand that this Release is intended to be as broad and inclusive as is permitted by the laws of the jurisdiction applicable to the facility where I am taking my training and that if any portion of this Release is held invalid, I agree that the balance of this Release should continue in full force and effect.

I have carefully read this information and I willingly accept the above terms and requirements:

Please complete this form and email it to teachertraining@shaktivinyasa.com, as an attachment, with subject field: 2015 Teacher Training Application. A \$500 non-refundable application fee is due with your application. Please submit your \$500 application fee through our online store.

Thank you and congratulations on taking the LEAP TO BEING A YES!

SHAKTI Vinyasa Yoga Studios