



## 2016-2017 Immersion & Teacher Training 200-Hour Level Contract

### PART I - Personal Information:

Name (First/Last): \_\_\_\_\_ Nickname: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Birth Date (MM/DD/YY) \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex - Female: \_\_\_\_ Male: \_\_\_\_

Email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Emergency Contact:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone #: \_\_\_\_\_

How did you hear about the Yoga Love Immersion & Teacher Training Program?

\_\_\_\_\_

## **PART II - Questions:**

Please respond thoroughly to the following questions on additional paper as needed.

### **A. Yoga Practice**

1. Please define yoga, its role for you personally and its role in general.
2. How long have you been practicing yoga?
3. What style of yoga do you practice?
4. What teachers and/or styles have influenced you?
5. Are you currently teaching yoga? If so, where, how often and what is your aim?
6. List your previous education and relevant training experiences (both yoga related and other fields). Please be specific.
7. Why are you interested in a yoga teacher training? Do you want to teach?
8. Why do you practice yoga?
9. What do you feel the role of a yoga teacher is?
10. What makes a good yoga teacher?
11. Why have you chosen to apply to this training above all others?
12. What's most challenging for you about yoga? Most easy?
13. How do you integrate yoga into your daily life?
14. What do you wish to achieve from completing this course?

### **B. Other Questions**

1. Do you have any physical or emotional health conditions that could affect your participation in the training?
2. Are you vegetarian? (If yes, what type and for how long for?)

3. Are you currently taking medication? Which ones? Why?

4. Are you allergic to anything?

**PART III – Student Enrollment and Obligations**

My investment in the 2016 YogaLove Immersion & Teacher Training Program includes an Unlimited Class Membership\* and guarantees me a space in the 2016 program. \_\_\_\_\_  
(Initials of Registrant)

All payments are due prior to the first day of the Immersion & Teacher Training Program. I will not be permitted to begin the program unless payment is complete. The Immersion & Teacher Training Program is 100% non-refundable and I understand that once I am enrolled in the program, no refunds will be given. I also understand that enrollment is complete at the signing of this Agreement. \_\_\_\_\_ (Initials of Registrant)

All 200 hours of this program and its full curriculum must be completed in order to receive your certification. Missed sessions, excessive lateness, late/incomplete work and/or other issues may result in your inability to complete this program. Your inability to complete this program will be left to the full discretion of YogaLove Immersion & Teacher Training Staff.

If medical, family or other unforeseen circumstances prevent me from completing my training, a special consideration **may** be made for me to retake parts of the Immersion & Teacher Training Program at another time and/or at my own expense. The decision as to what constitutes a special circumstance and whether or not I may be permitted to retake parts of the program are of the sole discretion of Amy Spicer, Owner & Director. I understand that any parts of the Program that I miss must be completed during the following year’s Immersion & Teaching Training Program offered within 1(one) year my currently enrolled year. I understand that medical records and/or other proofs may be required. I accept the risk that, for any reason, YogaLove is no longer operational at any time within the 1 (one) year in which I may retake parts of the program, I cannot seek a refund for any portion of my payment. \_\_\_\_\_ (Initials of Registrant)

I understand that Amy Spicer, Owner & Director, reserves the right to ask me to leave the program if my behavior is inappropriate, unethical or violates the YogaLove or Yoga Alliance ethical guidelines. \_\_\_\_\_ (Initials of Registrant)

*\*Unlimited Class Membership begins upon full and complete payment in the 2016 Program and ends on graduation day (03.19.17)*

**Part IV – Payment and Cost**

**Total Cost:**

Amount Paid: \_\_\_\_\_ Date Paid: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Additional Amount/s Due:**


Student Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Approval Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Amy Spicer; Owner & Director

**Part V – YogaLove Teacher Training School:**

Our program has been designed with great care to uphold the sacred practices & principles of yoga and to offer you a full and well-rounded experience into all that yoga offers you as a student, a teacher and the responsibility that teaching yoga brings. We stress that this is a science of the mind, body and spirit therefore we bring the understanding of all three into our program to offer you a comprehensive learning experience. We understand the importance and responsibility of sharing this information with others as a teacher and the sensitivity of the teacher/student relationship. We believe it is the yoga teacher's full responsibility to ensure a safe and uplifting environment in which their students can learn and grow on all levels, mind, body and spirit. Our program is geared to specifically address your passion and education for yoga, a combination that will result in your success as a student of yoga and a teacher.

**Part VI – Agreement & Authorization:**

I fully understand and agree to all above listed statements, term and conditions herein and fully and willfully participate in the YogaLove Immersion and Teacher Training Program.

Print Name: \_\_\_\_\_

Sign Name: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Amy Spicer; Owner & Director

**Congratulations & Thank You!**

**We are honored to have you in our program.**

**Namaste**