



**200-Hour Yoga Teacher Training
Application Form**

CONTACT INFORMATION

Full Name: _____

Address: _____

City: _____ State: _____

Zip Code: _____

Date Of Birth: _____

Primary Phone: _____

Email Address: _____

EMERGENCY CONTACT

Name: _____

Relationship to Applicant: _____

Contact Phone: _____

Address: _____

Email Address: _____

MEDICAL HISTORY

In order to aid you in this training, please let us know of any injuries, conditions, illnesses or anything that might impact you, your practice, participation in the training and/or preparation to teach. Please provide clearance from your physician if need be.

YOGA BACKGROUND

Please answer all questions below and email response to shivashaktinyc@gmail.com

1. What brought you to yoga?
2. How long have you been practicing yoga?
3. What does yoga mean to you?
4. What/who inspired you to go deeper in your practice?
5. What is your typical yoga and meditation practice? How often do you practice per week? How has your practice developed?
6. What yoga style do you currently practice?
7. What yoga style have you practiced or studied before?

8. Which teachers have primarily influenced your practice?
9. Do you have a current self practice? If yes, what does it consist of and how frequently do you practice on your own?
10. Do you have any additional studies past or present related to yoga (reiki, qigong, dance, acrobatics, health care, acupuncture, etc.?)
11. Do you have any other physical activities/exercise other than yoga? How often do you practice?

ADDITIONAL INFORMATION

1. Why are you interested in yoga teacher training?
2. What are your expectations in the training?
3. What physical, mental and/or emotional difficulties do you think may challenge you during the course of the training? How would you prepare yourself for this?
4. What other goals would you like to achieve in this program?
5. Do you have any other concerns or questions?
6. Option to upload a picture and / or bio.

SCHOLARSHIP SUPPORT

A limited amount of funding is available for eligible candidates in need of financial assistance. Scholarships are considered on a case-by-case basis. If you would like to be considered for scholarship funding, please write a 1-2 page essay that addresses the following criteria for selection:

1. Is financial need a factor for you?
2. Describe why this scholarship opportunity is valuable for your current personal and professional process.
3. How do you see yourself teaching yoga, or how might the training contribute to your future plans?

TUITION

A \$750 non-refundable deposit is required to hold your place and secure early bird pricing.* Full payment must be received before the start of the teacher training program. Students may pay for tuition and fees with cash, cheque, PayPal (with 3% fee), Venmo, or Zelle. All financial obligations to the school must be satisfied in order to receive a certificate of completion.

INVESTMENT

EARLY BIRD - BEFORE AUGUST 4, 2021:

\$2500 - PAID IN FULL

OR \$750 deposit + \$462.50/mo. for 4 months (total: \$2600)

AFTER AUGUST 4, 2021:

\$2700 - PAID IN FULL

OR \$750 deposit + \$512.50/mo. for 4 months (total: \$2800)

CANCELLATION POLICY - PLEASE READ CAREFULLY

We understand that things come up. If it becomes necessary for you to cancel, please notify us immediately by email at shivashkatiny.com. The following cancellation **charges** will apply:

- Cancellations before June 27: \$750 **non-refundable** deposit.
- Cancellations from June 27 - July 26: 50% refund of program cost, minus \$750 deposit.
- Cancellations after July 27: NO REFUND.

TERMS AND CONDITIONS

A \$750 non-refundable deposit is required to hold your place. Payments to the school must be made in full in order to receive a certificate of completion.

You are fully responsible for your participation and completion of your training. In order to receive a certificate of completion, you must comply with the training hours, attend classes and lectures, participate and partake in class discussions, group activities and complete all assignments.

You agree and understand the terms of your tuition, payment plan, cancellation and refund regardless of your completion of training.

MAKE UP HOURS:

We understand that life happens and some things are beyond your control, so we will do our best to work with you to make up any hours missed. Here are several ways you might make up hours and receive your 200-hour teacher training certification. Make up hours are on a case-by-case basis depending on lessons missed and hours needed for completion.

Option 1: You can arrange a private session with one of the lead teachers to make up for time missed (additional cost applies).

Option 2: You can attend the session you missed in a future 200hr teacher training for no additional charge. (This must be done within the year)

Option 3: Write a research paper on the topic you missed.

Option 4: Teach and video record a class / workshop that demonstrates your knowledge of the topic that you missed.

If you fail to complete your training within a year, you assume responsibility for any additional costs incurred.

A lack of participation, absences that are not made up or assignments that are not completed in a timely manner will result in dismissal from the program.

No refund will be given to anyone who is dismissed, nor will money be refunded if you do not complete your training.

By signing below you understand and are consenting to these terms and conditions. *

* I understand and agree to fulfill all the requirements of Shiva Shakti School of Yoga, New York City (hereafter 'Shiva Shakti') including in-class hours, homework, and non-contact hours outside of the classroom. I will receive a diploma of certification upon completion of all requirements and consent of lead instructors that can then be submitted to Yoga Alliance for 200-hour registration. I understand that Shiva Shakti reserves the right to ask me to leave the program if my behavior is unethical, inappropriate, or in any way violates the Yoga Alliance or Shiva Shakti ethical guidelines. Under such circumstances, I will not be refunded my tuition. I understand that all Shiva Shakti materials cannot be reproduced by me without permission of the authors. Failure to comply may result in legal action. I have read and accepted all the above terms and requirements.

SIGNATURE

DATE

Applicants who have been accepted will be notified by email. Please let us know here if you would rather be notified by phone. Applicants who have been accepted into the program must confirm participation immediately via e-mail or by return phone call to the person who notifies them. If an applicant fails to confirm participation and preferred method of payment within one week of acceptance into the program, another student may fill that space. Please indicate your preferred method of notification:

By Email: _____ By Phone: _____

By submitting this application, you acknowledge that you have answered the questions truthfully and to the best of your ability.

DISCLAIMER

SECTION 1 – REPRESENTATIONS AND WARRANTIES OF TRAINEES

I hereby represent and warrant to Shiva Shakti School of Yoga, New York City (hereafter, 'Shiva Shakti') which representations and warranties are an express condition precedent to Shiva Shakti allowing me to participate in the teacher training program, as follows:

1. I understand that yoga requires physical exertion which may be demanding and that I am fully aware of the risks involved. I further recognize that there are inherent risks in the practice of yoga which could potentially result in possible physical injury to me, and that I have had sufficient prior training, and that I am in sufficient condition to practice and teach yoga in a safe and healthy manner; and
2. I understand it is my responsibility to consult with a physician prior to and regarding my participation in the teacher training program, and that I am physically fit and do not have any medical condition which would prevent my full participation in the teacher training program and in subsequently teaching such program to my own students; and
3. I agree to assume full responsibility for any risks, injuries or damages, known or unknown, which may occur as a result of my participation in the teacher training program and/or subsequently engaging in such training in teaching my own students; and
4. I will act in a safe and responsible manner, and engage in the practice and teaching of the Shiva Shakti in a safe and responsible manner.

SECTION 2 - RELEASE OF LIABILITY AND INDEMNITY

In consideration of being accepted to participate in the Shiva Shakti 200-hour Yoga Teacher Training, I hereby consciously, voluntarily and precisely waive any claim that I may have against Shiva Shakti for any injury or damages that I may sustain as a result of participating in the teacher training program taught by Shiva Shakti and/or in participating in any class that I may teach utilizing in the Shiva Shakti 200-hour techniques taught in the teacher training program.

In addition, I hereby agree to forever release, discharge and acquit Shiva Shakti together with its agents, representatives, employees, trainers, officers, directors, shareholders, attorneys, predecessors, successors and assigns, and all persons, firms, companies, associations, insurers, contractors, subcontractors, subsidiaries, parents,

affiliates, and corporations connected with Shiva Shakti, from any and all claims, debts, liabilities, demands, obligations, costs, expenses, attorneys' fees, actions, and causes of action of every nature, character, and description which I have held, now hold, or may hold in the future, whether known or unknown, directly or indirectly, arising out of or in any way related to the exercise of yoga or the teaching of yoga, including but not limited to all education, information and yoga methods learned in the educational training program taught to me by Shiva Shakti.

SECTION 3 - PROPERTY RIGHTS

I hereby agree to protect and respect the property of Shiva Shakti 200-hour Teacher Training. I understand that by training with, and/or having a business relationship or association with Shiva Shakti, I may or will have access to and create or learn certain information belonging to Shiva Shakti that is proprietary and confidential.

CONFIDENTIAL INFORMATION as used throughout this Agreement means any secret or proprietary information relating directly to Shiva Shakti business, including but not limited to, products (class formats, training manuals and forms, photographs, videotapes, books, music, clothing and other merchandise design), customer or contact lists (whether existing prior to the signing of this Agreement or after; any customer created through any activity for Shiva Shakti is exclusively Shiva Shakti's customer for purposes of this Agreement and should not be used for promoting any other business), pricing policies, marketing plans and strategies, new personnel acquisition plans, trade "know-how", trade secrets, trademarks, research, product development techniques or plans, business acquisition plans, training systems, and/or other business affairs or processes of Shiva Shakti

"Shiva Shakti" and the icon logo are the property of Shiva Shakti School of Yoga, New York City.

SECTION 4 - NON-DISCLOSURE AND NONCOMPETE

I hereby agree to keep strictly confidential all Confidential Information and will not; without Shiva Shakti's express written authorization, signed by one of Shiva Shakti's authorized officers, share, give, sell, market or disclose any Confidential Information to any third person, firm, corporation or association for any purpose without prior consent. I agree not to use any Confidential Information for personal gain and will not share, give,

sell or market the Confidential Information for my own purposes during and after the term of this Agreement, without Shiva Shakti's prior written consent.

I further agree and fully and completely understand that any publication or copying of any Confidential Information, including, but not limited to, class formats, training manuals and forms, photographs, videotapes, books, music, clothing design and other merchandise design, and customer/contact lists without prior consent is strictly prohibited and is in violation of this Agreement. I will not remove any copy or sample of Confidential Information from Shiva Shakti without prior consent.

I have read the above representation and warranties of trainees, release and waiver of liability, and property rights protection, non-compete and disclosure agreement and fully understand and voluntarily agree to its contents.

Name (printed)

Date

Signature