

# Yoga Club

## Teacher Training Application

### 200 Hour RYT

### 200 Hour Therapeutic Yoga Concentration

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Date of birth: \_\_\_\_\_ Current occupation: \_\_\_\_\_

Emergency contact: \_\_\_\_\_ Phone number: \_\_\_\_\_

I accept the tuition, curriculum, participation and cancellation policies for this program, and give Yoga Club, LLC permission to use any photographs, images or videos taken during training including those containing my image for any training purpose and/or promotional use Yoga Club deems appropriate in its sole discretion, without compensation. Initial \_\_\_\_\_

I understand that Yoga and other physical practices offered by Yoga Club include physical movement as well as an opportunity for relaxation, stress re-education and relief of muscular tension. As is the case with any physical activity, the risk of injury, even serious or disabling, is always present and cannot be entirely eliminated. If I experience any pain or discomfort, I will listen to my body, adjust the posture and ask for support from the instructor. Yoga is not a substitute for medical attention, examination, diagnosis or treatment. Yoga is not recommended under certain medical conditions. I affirm that I alone am responsible to decide whether to practice Yoga or any other physical practices offered by Yoga Club. I hereby agree to irrevocably release and waive any claims that I have now or hereafter may have against Yoga Club, its instructors, organizers, officers, representatives, sponsors, or any providers of space to the club. I hereby agree to assume all risks & liability related to or resulting from any activity with Yoga Club. Initial \_\_\_\_\_

Note: Your information will not be shared with people outside of our school.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**YOGA ALLIANCE® REGISTRATION:** Yoga Club is an RYS® (Registered Yoga School) with Yoga Alliance® at the 200 hour level. Upon successful completion of the training program, graduates of Yoga Club Teacher Training will be eligible for registration with Yoga Alliance®.

**PARTICIPATION POLICY:** Yoga Club Teacher Training is designed for individuals seeking a deeper understanding of their yoga practice. Certificates of Completion for graduation will be provided at the discretion of the instructor's based on their assessment of the student's understanding of the materials as well as the student's capacity and ability to teach. Those receiving a certificate of completion may submit these certificates to Yoga Alliance for Registration as a Yoga Instructor. A certificate to teach is not automatic upon completion of the course. Full class participation, successful completion of the assigned curriculum, and self-study are required to receive a Yoga Club Certificate of Completion for its 200-Hour Yoga Teacher Training Program. There will be reading and writing assignments as well as practicum to be completed outside of the training sessions.

#### **Referral:**

If you were referred to this program by an instructor, colleague or friend please provide us with their name.

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# 200 Hour Yoga Teacher Training Application

(Please feel free to complete your answers on a separate sheet of paper)

Please indicate which 200 Hour Program you are applying for:

\_\_\_\_\_ 200 Hour Teacher Training

\_\_\_\_\_ 200 Hour Teacher Training with specialization in Therapeutic Yoga (must be a health care professional or have extensive training in anatomy/kinesiology)

## ***Current Experience Level***

What first drew you to a Yoga Practice?

How long have you been practicing Yoga?

Approximately how many classes per week do you take?

How long are these classes typically (1/2 hour, 1 hour, 1 ½ hours)?

Do you have a home practice, if so how many times per week do you practice at home?

How long is your home practice (1/2 hour, 1 hour, 1 ½ hours)?

What styles have you practiced (Vinyasa, Iyengar, Hatha, Ashtanga, Yin, Anusara, Power)? (est hrs each)

Which is your primary/favorite style of yoga to practice?

What other active lifestyle practices do you participate in regularly?

List any yoga workshops you have attended with instructor, topic covered and estimated hours.

Have you studied aspects of Yoga other than asana/pranayama? If so, please describe

## ***Teaching History, if any***

*If you have not been teaching yoga or any other practices please skip this section.*

Are you currently teaching Yoga?

If so, how long have you been teaching?

What tradition/style and number of classes per week?

Do you have teaching experience in practices other than Yoga (physical and non-physical)?

## ***Background of Interest***

Why are you seeking this training and what do you hope to gain from it?

Have you taken classes with a Yoga Alliance® Registered teacher?

For how many months or for how many hours estimated?

Who are your teacher(s)?

What studios have you practiced yoga regularly in and how many hours per week?

How long have you studied with your teacher(s)?

## ***Detail About Your Current Practice***

What are your favorite and least favorite poses and why (name two or three of each)?

What do you feel is the most rewarding aspect of your yoga practice?

What is the most challenging aspect of your yoga practice?

## ***Therapeutic Yoga Certification: If interested in pursuing Therapeutic Yoga Certification, please answer the following questions.***

Why are you interested in pursuing a certification in therapeutic yoga?

Please list any training you already have acquired either through academic institutions or workshops/trainings in the following: anatomy and Kinsiology, pharmaceuticals, etiology and treatment of disease/injuries, yoga therapy, Ayurveda, Mental and emotional health issues.

Are you currently a health care professional? If so in what field and what type of licensure?

Are you currently practicing therapeutic yoga? If so, in what setting?

What do you plan to do after you receive your therapeutic yoga certification?

***Your Health***

If there is anything you think we should know about your mental/physical health, please describe.

If you answer yes to any of the following specific questions, please describe fully on a separate page.

Are you under medical treatment for any physical or psychological condition?

Are you currently pregnant or trying to get pregnant?

Have you ever been hospitalized for a psychiatric condition?

Do you have any chronic physical limitations or disabilities?

Have you had a serious illness or major surgery within the last five years?

Do you have a communicable disease?

Are you in recovery from an addiction?

If yes, how long have you been in recovery?

List any prescription medications you are currently taking and indicate dosage and frequency of intake (other than birth control or cosmetic prescriptions).

# 200 Hour Yoga Club Teacher Training

## Cost, Payment Options, & Refund Policies

### COURSE FEE OPTIONS AND REFUND POLICIES

#### PAY BY THE WEEKEND:

In order to increase accessibility of our program, we allow you to pay by the weekend. That being said, to be enrolled in our program, you should immediately register for your first weekend as soon as you send in your application. The early tuition rate (which varies by weekend but is \$275 for the majority of the weekend trainings) is available 30 days in advance of each training weekend. Within the last 30 days prior to each training participants must pay the regular tuition rate which is \$50 in excess of the early tuition rate.

**APPLICATION FEE:** An administrative fee of \$200.00 is due upon application for all participants. This fee covers homework review, final class and mentoring. This is to be paid by both 200 Hour RYT and 200 Hour with Concentration in Therapeutic Yoga.

**PRACTICUM FEE:** A Practicum Fee of \$500.00 is due upon completion and submission of Practicum requirements. This fee is only to be paid by those enrolled in the 200 Hour RYT with concentration in Therapeutic Yoga.

#### PAYMENT OPTIONS:

- Cash (in person only)
- Credit Card Accepted Through PayPal Paid Online at <http://www.yogaclub.us>

#### REFUND POLICY:

- If Yoga Club cancels Teacher Training a refund of all unutilized funds will be issued.
- No refunds will be issued for sessions postponed for inclement weather or other unforeseeable issues.
- No tuition refunds will be issued for no-shows, late arrivals or early departures.
- Yoga Club reserves the right to amend this policy at its sole discretion.

#### SUBMIT Completed Application and Fee (\$200.00) to:

- Mail Application to Chrys Kub, Program Director Yoga Club Teacher Trainings  
[chryskub@yogaclub.us](mailto:chryskub@yogaclub.us)
- \$200 Application Fee can be paid on-line under 200 Hour Teacher Training.

Thank you and we look forward to working with you as you continue on your path of deepening your yoga practice. We will respond to your application as soon as possible. Be sure to check out the recommended reading (link on main teacher training pages) for your upcoming immersions so you are adequately prepared!