

Yoga University of Florida, Power Alignment Yoga®,
Altamonte Springs Yoga & MyLinda Morales
290 Hour Teacher Training Program 2019 - The Science of Teaching Hatha Yoga

APPLICATION: Your information will not be shared with others outside of our school

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____ Date of birth: _____

Current occupation: _____

Emergency contact: _____ Phone number: _____

Your Signature: _____ Date: _____

I accept the tuition, curriculum, certification and cancellation policies for this program, and give Altamonte Springs Yoga, Power Alignment Yoga, and Yoga University of Florida permission to use my photograph, image or any videos taken during training for training purposes and/or promotional use, without compensation.

YOGA ALLIANCE® REGISTRATION: Yoga University's 290 Hour Yoga Teacher Training Program is registered with Yoga Alliance® at the 200 hour level. Graduates of Yoga University's 290 Hour Yoga Teacher Training Program are eligible for registration with Yoga Alliance® at the 200 hour level.

PARTICIPATION & CERTIFICATION POLICY: Yoga University's 290 Hour Yoga Teacher Training Program is designed for those who are seeking a deeper understanding of themselves and their yoga practice. Certification is not automatic upon completion of the course and will be determined by the instructor's assessment of the student's understanding of the materials as well as the student's capacity and ability to teach. Full class participation, successful completion of the assigned curriculum, and self-study are required to receive Yoga University's Certificate of Graduation. There are reading and writing assignments, videos to view, group meetings, as well as practicum to be completed outside of the training sessions.

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WE WOULD LIKE TO KNOW MORE ABOUT YOU: (Please feel free to write or type your answers on a separate sheet of paper)

1. What drew you to a Yoga Practice?

2. How long have you been practicing Yoga?

3. Are you registered with Yoga Alliance® at the 200 hour level or higher?
 - a. If so, what RYS did you attend?

4. Have you practiced Iyengar Yoga? _____ If so, please describe

5. What other styles of Yoga have you studied?
 - a. Which style is your primary/favorite style of yoga to practice?

6. List yoga workshops you have attended.

7. Are you currently teaching Yoga?
 - a. If so, where and how long have you been teaching?

 - b. What tradition/style and number of classes per week?

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8. Do you have teaching experience other than Yoga? If so, please describe.

9. What do you hope to gain from this Training?

10. Which Teacher Training Program are you registering for?
Hatha _____ Vinyasa _____

11. Have you had a daily asana (physical poses) practice for at least six months?

12. How long is your daily practice? 1/2 hour 1 hour 1 1/2 hours 2 hours (+)
 - a. What postures do you practice during a personal session?

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

14. What is the most challenging aspect of your yoga practice?

15. If there is anything you think we should know about your mental/physical health? Please let us know.

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16. Please reflect on the following questions and answer them to the best of your ability.
 - a. What would prevent you (physically, mentally, emotionally, spiritually) from completing the Yoga University's 290 Hour Teacher Training Program?

 - b. Of these obstacles which are within your ability to prevent and how would you do that?

17. List three things you would like to gain from Yoga University's 290 Hour Yoga Teacher Training Program. Examples: Service to community, personal growth, etc.

If you answer yes to any of the following questions, please describe fully; you may use a separate piece of paper.

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

2. For females, are you currently pregnant or trying to get pregnant?

3. Have you ever been hospitalized for a psychiatric condition?

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4. Do you have any chronic physical limitations or disabilities?
5. Have you had a serious illness or major surgery within the last five years?
6. Do you have a communicable disease?
7. Are you in recovery from an addiction?
 - a. If so, how long have you been in recovery?
8. Describe your weekly alcohol consumption.
9. List any prescription medications you are currently taking and indicate dosage and frequency of intake (we do not need to know about birth control or cosmetic prescriptions).

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Books, yoga props, supplies, lodging and meals are NOT included in tuition and are the sole responsibility of the trainee.

REGISTRATION FEE: \$25 Registration Fee

PAYMENT OPTIONS:

- Cash (in person only at Altamonte Springs Yoga or Yoga University)
- Online:
 - Full Payment
 - Payment Plan

REFUND POLICY:

- If Yoga University of Florida LLC cancels the Training a full refund will be issued.
- No refunds will be issued for sessions postponed for inclement weather and every effort will be made to reschedule such sessions.
- A \$25 deposit is payable upon application. The deposit will be refunded if the applicant is not accepted to the program.
- If a student withdraws from the training the following refund policy applies:

If the student withdraws from training a minimum of **30 days *PRIOR*** to the start of training the student will receive a full refund minus an administration fee of \$100 and deposit (\$25)

If the student withdraws **0-30 days** prior to the start of training workshop *no refund will be issued.*

- No tuition refunds will be issued for no-shows, late arrivals or early departures.
- Yoga University of Florida LLC reserves the right to amend this policy at its sole discretion.

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For registration consideration, submit this completed application & Agreement via email info@altamontespringsyoga.com, or mail to:

Yoga University of Florida, 185 South Westmonte Drive, Suite 1202, Altamonte Springs, Florida, 32714

Thank you for considering yoga instructor training through Yoga University. It is an honor to teach Yoga and I look forward to sharing that honor with you. I will respond to your application ASAP.

Namaste, MyLinda 

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**Altamonte Springs Yoga, Yoga University of Florida &
Power Alignment Yoga® Agreement to Terms of Training**

I understand that the Yoga University's 290 Hour Yoga Teacher Training Program curriculum follows the criteria put forth by the Yoga Alliance® and that upon completion of my training with the Yoga University, I will be eligible to apply for registration with the Yoga Alliance® at the 200 Hour level.

I agree to the tuition of Yoga University's 290 Hour Yoga Teacher Training Program and understand that I will not receive a Certificate of Graduation from Yoga University's 290 Hour Yoga Teacher Training Program until all tuition and fees due are paid in full.

I understand that once training begins, my deposit and tuition are non-refundable if I should choose, for any reason, to withdraw from the program.

I understand that if I am on the Payment Plan and my training is suspended for any reason I will remain financially obligated for the full contract/tuition amount due.

I understand that if I miss a training session I can attend the missed session the next time it is offered and it is my responsibility to make up the missed hours. I also understand that I will not receive a Certificate of Graduation from Yoga University's 290 Hour Yoga Teacher Training Program until all missed sessions are made up.

I understand that there are videos, reading, tests and group assignments outside of training that are to be completed BEFORE certain training modules.

I understand that attending all training sessions, required courses and elective courses as well as completing all homework, satisfactorily passing all tests, and successfully completing the final project are requirements for graduation.

I understand that yoga books and props are required for this training and that the required yoga props and books are NOT included in my tuition. I understand that I must have all my yoga props and books by the **SECOND SESSION** of teacher training.

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I agree to show up on time for all scheduled sessions, to participate fully, to engage in all scheduled exercises and to help create a supportive, nurturing atmosphere for my peers, my teacher and myself.

I agree to communicate with Primary Instructor if I am experiencing an issue that prevents me from participating fully in the program. Examples are a physical injury that might affect my ability to practice and emotional issues that affect my ability to be fully present, etc.

I agree to respect the privacy of my peers by keeping information, conversations and issues confidential and within the spectrum of our training program.

I agree to and understand the above:

Name

Date