

## Application for Ananda Manyu 300 Hour Teacher Training

Name:

Address:

Email:

Phone:

Cell:

Date of Birth:

In Case of Emergency Contact: Name

phone:

Relationship:

Please list any medical conditions, injuries or medications you take.

1. Are you currently teaching yoga? If so, what style, where and for how long?
2. How long have you been teaching Yoga?
3. On average, how many classes do you practice per week ?
4. How many classes do you teach per week?
5. What style(s) of Yoga do you practice?
6. What style(s) of Yoga do you teach?
7. Do you teach private classes?
8. What Yoga workshops, training, conferences, etc. have you attended?

9. Have you taught any workshops? What were they? How did they go?

10. Have you done any personal study of yoga or yoga philosophy on your own? If so, what in particular?

11. Write a brief paragraph about your experience with your yoga teaching:

12. How has your yoga teaching affected your life off the mat? Why do you teach Yoga?

13. What type of students do you teach? Beginners, all levels, advanced, etc?

14. What more do you want to bring to your students as a teacher?

15. Why have you chosen this particular teacher training program?

**Please feel free to use extra paper to complete your answers.**

**Payment Options:**

Once your application is approved and you are accepted into the training program you can choose from our payment plans.

- Early Bird: Pay in Full by March 1, 2019: \$4,800
- Option 1: Pay in full by June 1, 2019: \$5,100
- Option 2: Pay in 3 payments by June 1, 2019: \$5,400 (3 Payments of \$1800)
- Option 3: Pay after June 1, 2019 (subject to availability) \$5,600.

All Registrations must be paid in full by July 1, 2019

All Payments are 100% non refundable and non transferable

Payments may be made online by Credit Card – please note that your payment will be made in New Zealand, so applicable foreign transaction fees charged by your credit card company may apply. You can also wire the money from your bank for a lesser fee. Please contact Mary Ellen for details and assistance.

**You must meet all of the application requirements and fully participate in every aspect of the training. All participants are required to be on time, complete all homework assignments, attend every class and event with an open mind and open heart.**

By signing this application, you unconditionally represent that you are in good health and fully able to perform all physical requirements of the Teacher Training. You understand and acknowledge that you are to receive the instruction for the Training

and you will not hold Mary Ellen Goodsir or Be You Wellness to any higher standard of care than that applicable to the standard of care required of similar yoga training and certification programs in the industry. You agree to waive and release Mary Ellen Goodsir and Be You Wellness it's agents, instructors and employees from all liability for any and all loss or damage while you are in the Training or while practicing yoga or other activities, programs or education offered by Mary Ellen Goodsir, Yoga Moves or the Training. It is understood that all tuition paid is completely non-refundable for any reason.

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

\_\_\_\_\_ Signature

\_\_\_\_\_ Date