



200 Hour International Yoga Teacher Training Application

Thank you for your interest in our 200 Hour International Yoga Teacher Training. Please read the Information Packet which outlines the expectations of each module of the program before completing the application process. If you have any questions, feel free to email shirley6yoga@gmail.com or call 1(306) 270-8638.

Application process:

- Review the Information Packet, including module expectations and training dates.
- Complete this Application Form and submit via email to shirley6yoga@gmail.com.
- Pay \$200 non-refundable application fee (will be applied toward tuition).
- Complete an interview – in-person, Skype, or Zoom preferred.
- Read and sign our Statement of Commitment and Waiver/Release form (will be provided following interview prior to Module 1 start date).
- Submit payment at least two weeks prior to Module 1 start date.

I am applying as a candidate for the following:

Inspirational Yoga Teacher (CYT) Christ-Centered Yoga Teacher (CCYT)

Location preference for Yoga Camps:

Phoenix, AZ Detroit, MI Saskatoon, SK Canada

Tuition:

The cost of tuition is \$3525.00 CAN. A \$200 non-refundable fee is due with your application, and will be applied toward tuition. Payments plans can be arranged with Training Division Leader.

An electronic version of the training manual is included in the cost of tuition. Printed training materials are provided for both Level 1 and Level 1-2 postures. Modules pertaining to postures consist of in-person Yoga Camps (refer to Information Packet). The cost of travel, meals, and the required reading materials are not included in the cost of tuition, and are the responsibility of the participant.

Please refer to the Statement of Commitment for payment information and cancellation/refund policy. If payment arrangements are needed, please email shirley6yoga@gmail.com.

Application Form

_____	_____
Name	Preferred Name
_____	_____
Address	City, Prov., Postal Code
_____	_____
Email Address	Best Phone
_____	_____
Emergency Contact/Relationship	Emergency Contact Phone/Email

Please answer the following questions as completely as possible. You may attach a separate page if needed.

How did you find out about our program? _____

Your occupation: _____

How long have you practiced yoga? _____

What is the most rewarding aspect of your yoga practice? _____

What is the most challenging aspect of your yoga practice? _____

Describe yoga experience, styles practiced, and any previous training: _____

Describe any yoga or related teaching experience: _____

What do you plan to do with your certification? _____

Do you feel you have been called into a leadership role in your life? Explain.

Do you have any concerns about participating in the program? _____

Why have you chosen to do our program and/or what about our program appeals to you?

Please describe where you presently are in your faith walk/spiritual journey. Use separate page if needed.

Do you currently attend a church? If so, which one and what denomination is it (if any)?

Health Information:

Please state any medical limitations or current medical treatments we should know about:

Have you experienced any of the following (check box if Yes)?

- High blood pressure
- Diabetes
- Heart conditions
- Respiratory conditions
- Bone or joint conditions
- Retna problems or Glaucoma
- Back pain or injury
- Communicable disease
- Addiction
- Diagnosed mental-health condition
- Seizures or strokes
- Physical disability
- Are you currently pregnant? Due date: _____
- Have you recently had a baby? Delivery date: _____
- Cleared for physical activity?

If you checked "Yes" for any of the above, please explain: _____

Do you have any other conditions that might limit your ability to fully participate in a yoga teacher training program? If "Yes", please describe: _____

Criminal Background:

Have you ever been convicted of a felony?

Have you ever been incarcerated?

If you checked "Yes" for any of the above, please explain: _____

Acknowledgement:

I certify that I am at least 18 years of age and am physically able to participate in a yoga teacher training program. I acknowledge that all information submitted in this application is true and accurate. I understand that incomplete or inaccurate information may result in my non-acceptance or dismissal from the program. I acknowledge that I have read the information packet, admissions criteria, and cancellation/refund policy.

Signature (please type if electronic) _____
Date

Printed Name