

# 200 HOUR TEACHER TRAINING

## FIND YOUR POWER

Led By: Stacey Bell and Carrie Parker

### **TRAINING DATES**

Relationship:

| INAIMING DAILS   |  |   |
|--|--|---|
| Circle One:  | FALL(WEEKEND)  | WINTER(TUES/THURS)  |
|  | SPRING(SAT/WED)  | SUMMER (MON-FRI)  |
| foundational 200 ho<br>practice. You will di<br>confidence and fin-<br>precision. You will g | our program is perfect five into yoga teachings ding your voice. You wet the time and suppor | each classes, or you just love yoga, this for you. You will deepen and transform your s and anatomy. You will focus on building your ill learn to speak with clarity, creativity and rt you need for personal growth. This is the es you for the classroom—and for life |
| PERSONAL INFORM  | MATION   |   |
| Name:  |  |   |
| Street Address:  |  |   |
| City, State and Zip (  | Code:  |   |
| Phone:   |  |   |
| Email Address:   |  |   |
| Occupation:  |  |   |
| <b>Emergency Conto</b>   | ıct  |   |
| Name:  |  |   |
| Phone:   |  |   |
|  |  |   |

**PAYMENT & DEADLINES:** In order to secure your space and rate in teacher training, you will have to submit your complete application and \$500 non- refundable deposit.

Early Bird Rate & Deadline: \$3,600 if application and deposit received 1 month prior to training start date – for example if training begins on October 1<sup>st</sup>, early bird expires September 1<sup>st</sup>.

Final Deadline: 5 days prior to training start date

Regular Rate: \$3,900

Monthly Payment Plan Available: Processing fee will be added per payment

**REFUND POLICY:** Should you need clarification on the specific deadline dates for teacher training, please contact Powerflow Yoga.

IMPORTANT: PLEASE READ THE BELOW REFUND POLICY AND ACKNOWLEDGE

Refund Window: No refunds will be given 21 days prior to training start date – for example if training begins October 1st, no refunds given after September 9th.

Should you exercise the refund option within the refund window, there will be a \$100 processing fee.

\$500 deposit is non-refundable.

I have read and accept the above terms and requirements: Yes No

Please initial:



#### **ADDITIONAL INFORMATION**



| 4. Why do you want to do Powerflow's training?  |
|---|
| 5. What do you hope to gain from this training?   |
| 6. Have you attended any teacher trainings in the past? If so, where?                               |
| 7. Do you have a pranayama practice? If so, please describe.  |
| 8. Do you have a meditation practice? If so, please describe.                                       |
| 9. Please list any injuries or medical conditions that may affect your ability in certain postures. |



| To. Floade Share any ming cise about yourse  | in mar you reer we shootaknow. |
|--|--------------------------------|
| 11. T-Shirt or Tank Top (circle one)         | Size                           |
| 12. Write your name exactly as you want it t | o appear on yourcertificate:   |

10. Please share anything else about yourself that you feel we should know

#### PROGRAM PARTICIPANT AGREEMENT:

I understand that I must pay in full and fulfill all the requirements of the training including in-class hours and homework to receive my 200 hour certification. During my training, I will take at least 2 to 3 classes per week at Powerflow. I also agree to teach a New Talent Community Class at Powerflow before the completion of my training. Upon completion, my training hours can be submitted to the Yoga Alliance to register my hours. I understand that Stacey Bell and Carrie Parker reserve the right to ask me to leave the program if my behavior is disruptive, inappropriate, negatively impacting other students learning, unethical or violates the Yoga Alliance ethical guidelines. Under such circumstances, I understand I will not be refunded my tuition.

I understand that I will receive a full refund minus the \$500 non-refundable deposit and \$100 processing fee if requested within refund window. No refunds will be issued after refund window.

I understand that if I am unable to complete the teacher training, and I am on a payment plan, I am still responsible to make all remaining payments due to Powerflow Yoga LLC.

I understand that all training materials are proprietary and cannot be reproduced or distributed by me without the permission of Powerflow Yoga.

I understand that if I am unable to complete the teacher training that I need to return the Powerflow Yoga teacher training manual and other training materials that were provided to me.

I have read and accept the above terms and requirements: Yes No Please Initial:



## ASSUMPTION OF RISK, HEALTH WARRANTY, RELEASE AND WAIVER OF LIABILITY , hereby agree to the following: That I am participating in yoga classes and in training at Powerflow Yoga, LLC during which I will receive information and instruction about yoga. I recognize that yoga requires physical exertion that may be strenuous and may cause injury. I am fully aware of the risks and hazards involved. I understand that it is my responsibility to consult with a physician prior to and regarding my participation in the yoga class/training. I further understand that if I become pregnant it is my responsibility to inform the instructor and consult a physician prior to and regarding my participation in the yoga class/training. I represent and warrant that I am physically fit and have no medical condition that would prevent my full participation in yoga classes/training. I understand that instructors may sometimes physically adjust a student during yoga classes/training. If I do not want such physical adjustments, I will inform the instructor at the beginning of each class or training. I also acknowledge that it is my responsibility to inform the instructor when an adjustment has gone as far as I desire at that time. In consideration of being permitted to participate in yoga classes/training, I garee to assume full responsibility for any risks, injuries or damages, known or unknown, which I might incur as a result of participating in the yoga class/training. In further consideration of being permitted to participate in yoga classes/training, I knowingly, voluntarily and expressly waive any claim I may have against Powerflow Yoga, LLC, its owners, instructors, employees and agents for any injury or damages that I may sustain during or as a result of participating in the yoga class/training. I, my heirs or legal representative forever release, waive, discharge and covenant not to sue Powerflow Yoga, LLC, this includes Powerflow Yoga's owners, instructors, employees, agents and representatives for any injury or death caused by their nealigence or other acts. Powerflow Yoga, LLC is not responsible for any personal belongings I bring to or leave at the studios. I have read the above release and waiver of liability and fully understand its contents. I voluntarily agree to the terms and conditions. I have read and accept the above release and waiver: Yes No Please Initial: Signature: Date

If you have any questions about this application please email or call Christine Joseph: cjoseph@powerflownj.com / 973.986.8994



**Print Name:**