



Yoga Teacher Training Program
Application
Summer 2012



Registered Yoga School

200 hour program approved by Yoga Alliance

Visit www.yogaalliance.org

Yoga Pointe, Inc
3135 South Florida Ave
Lakeland, FL 33813
www.yogapointe.com
info@yogapointe.com
863-937-8069

Health Information

Describe your present state of health: _____

○Physical limitations: _____

○Serious illness, injury or major surgery within the last two years: _____

○Under medical or mental health treatment or supervision for: _____

Please check and clarify any of the following conditions that apply to you:

○Allergies: _____

○Arthritis: _____

○Asthma: _____

○Chronic sinus condition: _____

○Diabetes: _____

○Endocrine conditions: _____

○Epilepsy: _____

○Glaucoma: _____

○Hernia: _____

○Hypoglycemia: _____

○Heart conditions: _____

○High blood pressure: _____

○Low blood pressure: _____

○Intestinal conditions: _____

○Osteoporosis: _____

○Mental Illness: _____

○Recent injuries: _____

○Recent surgery: _____

○Spinal conditions: _____

○Ulcers: _____

○Pregnant (due date): _____

Please describe any other physical or mental conditions that would be helpful for your instructor to be aware of.

In case of emergency, please contact:

Name: _____ Relationship: _____ Telephone: _____

Physician: _____ Telephone: _____

Therapist: _____ Telephone: _____

I certify that the above information is true and complete to the best of my knowledge and that I will not hold Yoga Pointe, Inc. or my instructor liable for any mishaps arising from my participation in the yoga teacher training program.

Signature _____ Date _____

*This health information will be held private and confidential by Yoga Pointe, Inc and is for informational purposes only.

Please sign this agreement and return with your registration form. Please keep a copy for your records.

Cancelation Policy:

Because of application process and preparation required for each student in teacher training programs, cancellations earlier than one month prior to the program start date will be charged a \$50 cancellation fee. If you cancel later than one month before the program start date, you will forfeit your \$200 deposit. **If you drop out of the program after the start date, there will be no refund.** You may, however, apply your tuition balance to a future program, workshops, or classes. Unused class tuition is non-transferrable.

Attendance Policy and Certification Requirements:

Full attendance in the program is required for Yoga Alliance certification. It is not recommended or desired that you anticipate missing any weekends. In the case of emergency only, making up the weekend will require extra time and money.

Depending on the weekend's curriculum, you will have to pay private hourly rate to make up the content and contact hours. If you miss more than one weekend we will encourage you to drop out of the program and re-enroll in another future program or you will graduate with a certificate reflecting the number of hours you completed. Remember that Yoga Alliance will not certify you until you have completed the 200 hour minimum.

You must demonstrate your knowledge and understanding of yogic concepts and practices by successfully complete written work and teaching sessions. During mandatory practice teach sessions you must demonstrate an ability to guide and teach yoga classes using the methodology presented in the training. All required work must be completed before graduation. As a final certification requirement, it is important that you be balanced and conscious in your behavior and adhere to the code of ethics outlined below. Completion of Yoga Pointe, Inc's program does not guarantee that you will be hired as a teacher at Yoga Pointe, Inc.

Code of Ethics and Agreement

The following is an integration of the code of ethics from Yoga Alliance and Yoga Pointe, Inc:

Yoga Alliance code of conduct is a declaration of acceptable ethical and professional behavior by which all registrants agree to conduct the teaching and business of yoga. It is not intended to supersede the ethics of any school or tradition but is intended to be a basis for yoga principles. As a RYT®, E-RYT or representative of a RYS®, I agree to uphold the following ethical principles:

- Conduct myself in a professional and conscientious manner.
- Acknowledge the limitations of my skills and scope of practice and where appropriate, refer students to seek alternative instruction, advice, treatment or direction.
- Create and maintain a safe, clean and comfortable environment for the practice of yoga.
- Encourage diversity by respecting all students regardless of age, physical limitations, race, creed, gender, ethnicity, religion or sexual orientation.
- Respect the rights, dignity and privacy of all students.
- Avoid words and actions that constitute sexual harassment.
- Adhere to the traditional yoga principles as written in the Yamas and Niyamas.
- Follow all local government and national laws that pertain to my yoga teaching and business.

Yoga Pointe, Inc code of ethics/conduct:

-It is our responsibility to uphold and foster a safe and sacred environment in which to allow the transformation work of mind, body, and spirit. It is essential that anyone teaching yoga have a high degree of personal integrity and maintain clear boundaries in the role of serving the students.

-As yoga professionals/teachers, we must remain aware of this power dynamic and never exploit the vulnerability of a student for personal gain or gratification.

-I understand that the purpose of the ethics and this agreement is to protect the environment of sanctuary for the students and to support the clarity, consciousness and self-responsibility of individuals. I agree that my purpose as a yoga teacher is to serve the students' personal exploration. I agree that I will avoid any activity or influence that is in conflict with the best interests of the students or is solely for my own personal gain or gratification.

I have read and understand the terms and conditions as outlined in this document, and agree to be bound by these conditions.

I understand that I must meet the above criteria to in order receive certification. I agree to honor this code of ethics and conduct.

I have reviewed the program philosophy, requirements, and weekend dates of training on www.yogapointe.com website and am fully informed of this information.

Name _____

PLEASE PRINT

Signature _____ Date _____

Payment Information:

Tuition is \$1995.00 (\$1850.00 when paid in full one month before program begins.)

Please complete this form, include a \$200 deposit, or other payment amount and submit in person or by mail to:

Yoga Pointe, Inc
Attn: Jana Whiddon
3135 South Florida Ave
Lakeland, FL 33803

Method of payment: _____ Visa _____ MC _____ Check _____ Cash
(Please make checks payable to: Yoga Pointe, Inc)

Visa or MasterCard # _____

Expiration date: _____

Billing address: _____

Signature: _____