



Body & Soul

2728 Asbury Road, Suite 777, Dubuque, IA 52001
563.556.9642 | relaxlivewell.com | julia@relaxlivewell.com

YOGA TEACHER TRAINING & PERSONAL TRANSFORMATION 200 HOURS

Application Form

April - December 2024

One weekend a month for 9 months

Name _____ Date _____

Address _____

City/State/Zip _____

Home/Cell phone _____ Work phone _____

Email address _____ Date of Birth _____

Emergency Contact _____ Phone number _____

ADMISSION REQUIREMENTS: Space is limited to 16 participants. Admission to this program is offered on a first come, first served basis for those who have:

- Completed this application
- Made the appropriate payment
- Successfully completed an interview
- Have a consistent yoga practice of at least one year

Please tell us how you heard about the program? (Check all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Body & Soul Email | <input type="checkbox"/> Friend _____ |
| <input type="checkbox"/> Yellow Pages | <input type="checkbox"/> Yoga Teacher _____ |
| <input type="checkbox"/> Facebook | <input type="checkbox"/> Other _____ |

I, _____, release Body & Soul Wellness Center and Spa, its owners, employees and contractors, and will hold them harmless from any and all liability arising out of any personal injuries or damages, foreseeable or unforeseeable, which may occur as a result of my participation in the Yoga Teacher Training & Personal Transformation program offered by Body & Soul Wellness Center and Spa. I hereby declare myself physically and mentally sound and capable of participation in this training program.

Signature: _____ Date: _____

Please answer the following questions:

1. Please describe your experience in yoga. How many years have you been practicing and with what frequency? Do you have a daily meditation / yoga / spiritual practice?

2. What is inspiring you to take this program? What qualities, strengths or attributes would you bring to this training program? What are your expectations for the training?

3. Describe your current health and wellness:

a. Physically

b. Mentally

c. Spiritually

4. Please describe how you interact in a group setting.

PAYMENT OPTIONS: Please check your preferred payment option:

- 1. **PAID IN FULL FEE:** \$2850 if paid by April 10th, 2024.
- 2. **PAYMENT PLAN:** \$2995 - \$595 due by April 10th, 2024. The 8 payments of \$300 on the 1st of each month beginning May 1, 2024 to December 1, 2024.

PLEASE NOTE: Your tuition includes free participation in yoga classes at Body & Soul for the duration of this training program and (excludes any other special workshops or events). A \$648 value.

Authorization for Automatic Bill Payment

I authorize Body & Soul to charge \$300 per month, on the 1st day of each month, for 8 consecutive months beginning May 1, 2024 through December 1, 2024. I have the right to stop the charge by notifying Body & Soul at least seven (7) business days prior to the first date of training. My authorization will remain in effect until revoked by me, my financial institution, or Body & Soul. I understand that if I revoke the authorization for the credit card or Electronic Funds Transfer payment, I will not be able to attend the training.

Signature: _____ Date: _____

Thank You! We are so excited to share this powerful transformational journey with you!

2024 DATES:

One weekend a month for 9 months; Saturdays 8:00-6:00 pm; Sundays 8:00-5:00 pm

April 27-28

May 18-19

June 22-23

July 20-21

August 17-18

September 14-15

October 12-13

November 9-10

December 7-8

REFUND POLICY: Refunds can only be given for the PAID IN FULL FEE. Refunds do not apply to the PAYMENT PLAN option.

A student will receive a refund of all tuition monies paid if tuition is collected in advance of the first day of the program, and if the student does not enter the program. The school will retain a \$100 administration fee.

A student who withdraws or is dismissed after attending at least one class, but before completing 4 weekends of instruction, is entitled to a pro rata refund as follows:

After completion of:	Refund:
First weekend	70%
Second weekend	60%
Third weekend	50%
Fourth weekend	40%
Fifth weekend	No Refund

As part of this policy, Body & Soul will retain a one-time administration fee of \$100. The student will receive the refund within 40 days of the termination date.

YOGA ALLIANCE CODE OF CONDUCT:

The Yoga Alliance Registry 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 Registered Yoga Teacher (RYT®), Experienced Registered Yoga Teacher (E-RYT®) or representative of a Registered Yoga Schools (RYS®), I agree to uphold the following ethical principles:

- Conduct myself in a professional and conscientious manner. This includes, but is not limited to, ensuring that I live up to any commitments I make to my students or to the public, and ensuring that my practices and behavior conform to the representations I make about myself in holding myself out as a yoga practitioner who adheres to certain precepts.
- 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 or harassment based on other legal protected characteristics.
- 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.