**LOTUS GARDENS YOGA SCHOOL**

**200 HOUR YOGA TEACHER TRAINING**

**CONFIDENTIAL APPLICATION**

TODAYS DATE:  TRAINING LOCATION:

FULL NAME:   to be printed on your certificate of completion.

PREFERRED NAME:

EMAIL: note email is the main form of communication

BEST CALL NUMBER(S):

ADDRESS: books to be sent to this address – must include zip code – no po box

Please initial:\_\_\_\_\_\_\_\_ I have read and accept Lotus Gardens, LLC policies on following pages.

I plan to pay the training tuition in full \_\_\_\_\_  or commit to the 3 element payment plan \_\_\_\_\_.

Return APPLICATION by:

EMAIL to [LaraWard@LotusGardensYoga.com](mailto:LaraWard@LotusGardensYoga.com)

Or BY MAIL to Lotus Gardens, LLC 130 Indian Trail Road  New Milford, CT  06776

*\*if mailing please let Lara Ward know with an email so we may hold your space.*

Any questions? Contact Director Lara Ward

Call/text 203 837 0122 \* [LaraWard@LotusGardensYoga.com](mailto:LaraWard@LotusGardensYoga.com)  \* www.LotusGardensYoga.com

 Page 1

**CONFIDENTIAL HEALTH HISTORY**

Name:                                                                                                                           Date:

Birthdate:

 Occupation:

Do you have experience repetitive motion in your work or lifestyle:

What is the present state of your health?

Describe your typical weekly fitness program:

In the below questions, please answer if any of these issues/concerns are impacted (or benefited) by yoga.  If so please explain.  Do you have now or have you had:

1. Difficulty with exercise?
2. Have you been advice not to exercise from a physician?
3. Recent surgery (within last year)?
4. Muscle, joint or spine issues?
5. Chronic illness or condition?
6. Heart problems, chest pain or stroke?
7. Lung or breathing problems?
8. Blood pressure concerns?
9. Pregnant or have been within last 3 months?
10. Weight concerns?
11. Mental Health concerns (Depression, Anxiety, Eating Disorder, PTSD...)?

Emergency Contact:

E-Contact's Phone:

Page 2

**RELEASE OF LIABILITY**

**I**, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby acknowledge that I have voluntarily applied to participate in activities related to physical training involving Yoga.

I AM AWARE THAT THE ACTIVITIES DESCRIBED ABOVE MAY BE HAZARDOUS AND I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED AND HEREBY AGREE TO ACCEPT ANY AND ALL RISKS OF INJURY OR DEATH.

As lawful consideration for being permitted by Lotus Gardens, LLC, or one of its affiliated organizations to participate in these activities and use the facilities at which these activities are conducted, I hereby agree that I, my heirs, distributees, guardians, legal representatives and assigns will not make a claim against, sue, attach the property of, or prosecute Lotus Gardens, LLC, or any of its affiliated organizations and/ or the owner or lessor of the premises where the activities are conducted  for injury or damage resulting from the negligence or other acts, howsoever caused, by any employee, agent or contractor of Lotus Gardens, LLC, or its affiliates, as result of my participation in aerobic training involving Yoga.  In addition, I hereby release and discharge Lotus Gardens, LLC, and its affiliated organizations from all actions claims or demands I, my heirs, distributees, guardians, legal representatives or assigns now have or may hereafter have for injury of damage resulting from my participation in the above described activities.

**I HAVE CAREFULLLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS.  I AM AWARE THAT THIS IS A RELEASE OF LIABILTY AND A CONTRACT BETWEEN MYSELF AND Lotus Gardens, LLC, AND/OR ITS AFFILIATED ORGANIZATIONS, AND I HAVE SIGNED IT OF MY OWN FREE WILL.**

Dated:\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Page 3

**Lotus Gardens Yoga School**

**Information and Policies**

**APPLYING:**

**1. Apply: Complete & email your application or pickup/turn at a class or meet & greet.** Applicants must have a minimum of one year of yoga practice; home, studio or gym practice is acceptable. Consideration is made for those in compatible fields.  Please contact our office if you have questions regarding your eligibility before applying. 

**2. Interview:** Lara Ward, Director of LGYS, will contact you for a phone/personal interview to discuss your participation.  This is a great opportunity to discuss all questions you may have regarding your YTT journey.

**3. Deposit:  Make Your $150** (+39.53 tax = $159.53) **non-refundable deposit using the paypal link below or mail check** to Lotus Gardens, LLC 130 Indian Trail Rd, New Milford, CT 06776.  Note: This $531.75 is included in the Total Tuition fees.

**4. Confirmation:** Once deposit is made, your Commitment Letter is emailed to you outlining your training information.  Your **YTT Books (included in your tuition) and are sent to you.**

**5. Tuition Payment: Books & Manual Included \*** SAVE $275 with early registration

**EARLY SAVINGS FOR WINTER 2019 TRAINING \* REGISTER BEFORE DEC 9 \* Save $275**

**EARLY PAY IN FULL $2,550** (+tax)

**PAY IN FULL $2,825** (+tax)

**TWO PAYMENT PLAN OPTIONS:**

**3 PAYMENTS of $985** (+tax) **= $3,105** (+ tax)

Payment 1 $1,047.54 due on or before the 1st day of training

Payment 2 $1,047.54 due on or before 2nd element begins

Payment 3 $1,047.54 on or before 3rd element begins

**Or 8 MONTHLY PAYMENTS OF $400**(+ tax) **= $3,200** (+ tax)

For months 1-8, tuition payments are due on or before each training weekend

1. **Receive your Books & Manual on the first day of your journey!**

**CERTIFICATION REQUIREMENTS**:

Each trainee is required to attend and successfully complete all outlined assignments, classroom instruction and element hours to earn their 200 hour Yoga Teacher Certification.

Page 4

**NON-CERTIFICATION PARTICIPATION**:

Participation as a non-certification candidate/trainee is welcomed.  This is a wonderful experience to increase your personal practice as well as expand your knowledge in all aspects of yoga.  Non-certification participation will need to be outlined as such prior to the start of the course.  Participants will be allowed to opt out of any/all assignments outside the classroom hours and will not be awarded a certificate at the end of the program.

**PAYMENT / REFUND POLICIES**

**Refunds**: \* **Deposits are non-refundable.**

**\* Tuition fees are refundable up to10 days prior to the training start date less $50 administration fee.**Book and refunds:  If books have been received you may elect to keep them and have their cost deducted from your refund or return the unused unmarked books and receive the full refund less admin fee.

**\* Within 9 days to module/weekend start there are NO REFUNDS for registered trainings.** Credit maybe awarded towards an equal training course within one year.

\* If Lotus Gardens, LLC cancels the program for any reason all fees are returned.

**Leave of Absence, Postponement of Participation in Training or Withdrawal of Program**:

For any reason, trainees may take a leave of absence. Notification to Director, Lara Ward will be required as soon as possible. Trainees may return to the 200 hour Yoga Training at anytime in the future when there is space available. Trainees may be required to re-apply and repeat the full program. Additional fees may apply.

Note: Future training locations may vary throughout CT, NY & MA and Lotus Gardens, LLC cannot be held responsible for travel required for credited training locations.

**Acceptable forms of payment**:

On-Line Website Paypal Link at www.LotusGardensYoga.com

Mail: Personal or Bank Checks

In Person: Cash, Personal or Bank Checks \* All cash receivables are given receipt.

Checks payments are payable to **Lotus Gardens, LLC**

For questions or concerns, call/text Director, Lara Ward at 203 837 0122 or email [LaraWard@LotusGardensYoga.com](mailto:LaraWard@LotusGardensYoga.com)

Page 5

**YOGA STUDIES, EXPERIENCE & BACKGROUND**

1) What first brought you to study yoga?

2) What experience do you have in Yoga (years of study, styles…)?

3) What is your current yoga/meditation practice?

4) Have you read any of the ancient yoga texts such as Yoga Sutras, Bhagavad Gita, Vedas?  If so, which one(s)?

5) Do you have a personal yoga philosophy?  If so, what is it?

 Page 6

 6) Are you familiar with Hinduism &/or Buddhism?  Are they important to you?

7) Are you familiar with Sanskrit?  Is this important to you?

8) Identify ***one*** aspect of yoga you find most important and why?

9)  Are there any aspects of yoga you shy away from?  If so, do you know why?

10) What is your experience of anatomy (classes from high school, college or self study…)?

 11) Do you have any Certifications, Licenses or Degrees in Healing, Therapy, Body or Energy Work, Fitness or Academic Teaching?  If so, please list:

12) Do you wish to teach when you complete this program?  If so, what will be your focus?

13) Is there anything in your personal life right now that may hinder your ability to fully concentrate/participate in your training? Is your family supportive of your studying and/or teaching yoga?

15) How did you hear about Lotus Gardens Yoga Teacher Training?

16) Anything else you’d like to add?

*Lotus Gardens, LLC*

*A Registered Yoga Alliance School since 2001.*

*With over 400 certified yoga teachers now teaching worldwide.*

*We believe in small group trainings with personal attention to each trainee’s professional development!* Page 7