



200 HOUR TEACHER TRAINING

PROGRAM DIRECTORS: April Evans + Dana Tarasavage

If you do not practice regularly at New York Yoga, you may learn more about our teachers by viewing their bios at <http://newyorkyoga.com/index.php?content=instructors>.

GUEST INSTRUCTORS:

Jessica Chazen, Michael Gilbert, Jen Parker, Alex Montefalco, David Hollander, Danielle Storm + MORE!

FALL 2019 - 200-HOUR PROGRAM DETAILS:

The program runs for select weeks Tuesdays and Thursdays 6:30-9:30pm and select Sundays 9:00am – 6:00pm (with one hour for lunch on Sundays).

The requirements for 200-hour certification include 180 contact hours supervised by New York Yoga teaching faculty and 25 non-contact hours.

APPLICATION PROCESS

Please take your time to look over the entire application before filling it out. Respond to each question thoughtfully and completely. Incomplete applications will not be considered. Please be aware that acceptance is given on a rolling basis and that no spot can be guaranteed until payment is received. You may submit your deposit by check, cash, money order, or credit card. Please make checks out to New York Yoga.

APPLICATION REQUIREMENTS

1. Complete and submit application
2. Remit \$500 application fee

You have three options for submitting your completed application:

1. Email General Manager and Director, Rachel Nunez (rnunez@newyorkyoga.com) with application attached. Subject – Application for 200 Hour Teacher Training
2. Mail to:

New York Yoga Teacher Training Program
1629 York Ave
New York, NY 10028



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3. Submit in person at:

New York Yoga
1629 York Ave
New York, NY 10028

OR

New York Yoga HOT
132 E. 85th St, 2nd Floor
New York, NY 10028
(212) 717- www.newyorkyoga.com

Please complete this application and submit it with appropriate payment according to the payment schedule on the next page. Please be advised that enrollment is limited and will be assigned on a first-come first-served basis according, but not limited, to the order of registration and amount of payment received.

ACCEPTANCE NOTIFICATION

Applicants who have been accepted into the New York Yoga Teacher Training program will be notified via e-mail within two weeks of receipt of your application. If you do not have access to e-mail on a regular basis, please contact (212) 717-9642 for further assistance. All accepted applicants must confirm their registration via e-mail or telephone. If an applicant fails to confirm, his/her spot may be offered to another applicant.

CURRENT NEW YORK YOGA MEMBERS

Current Paid in Full Memberships will be frozen for the duration of Teacher Training.



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CASH/CHECK PAYMENT SCHEDULE:

<u>APPLICATION DEADLINE</u>	<u>TOTAL TUITION</u>	<u>PAYMENT SCHEDULE</u>
Before July 1st, 2019	\$2795 (save \$500!)	Early Bird Special – Paid in Full
July 1st +	\$3295	Paid in Full
July 1st +	3 Payment Plan	\$825 due with application* \$825 due on Oct 1st \$1645 due on Dec 1st

Paid in full with application*

* Please note that the deposit is due with application.

Full Name _____

Street _____

City, State, ZIP _____

Phone _____

Email _____

200-HOUR TEACHER TRAINING APPLICATION

Enclosed is my check or money order made out to New York Yoga in the amount. I agree to pay the balances required above no later than the dates set forth. I also, understand that there is an additional fee of \$150 for my Teacher Training Manual which will be provided to me on the first day of class. By signing, I acknowledge and agree to the payment schedule above:

Signature

Date



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CREDIT/DEBIT CARD PAYMENT SCHEDULE:

APPLICATION DEADLINE	TOTAL TUITION	PAYMENT SCHEDULE
Before July 1st, 2019	\$2795 (save \$500!)	Early Bird Special – Paid in Full
July 1st +	\$3295	Paid in Full
July 1st +	3 Payment Plan (\$3295)	\$825 due with application* \$825 due on Oct 1st \$1645 due on Dec 1st
July 1st +	4 Payment Plan (\$3300)	\$825 due with application* \$825 due on Oct 1st \$825 due on Nov 1 st \$825 due on Dec 1 st

CREDIT CARD PAYMENT AGREEMENT

Full Name _____

Street _____ City, State, ZIP _____

Phone _____ Email _____

Credit Card # _____ Expires _____

Credit Card Type: American Express Visa/MasterCard Discover

By signing, I acknowledge and agree to the payment schedule above. I authorize New York Yoga to initiate credit card debit entries for tuition payments according to the schedule above. I also, understand that there is an additional fee of \$150 for my Teacher Training Manual which will be provided to me on the first day of class.



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Name

Date

PERSONAL INFORMATION

First Name _____ MI ____ Last _____

Birth Date _____ Gender: ___ Female ___ Male

Address _____ Apt _____

City _____ State ____ ZIP _____

Day Phone _____ Evening Phone _____

Email Address _____

Current Occupation _____

Emergency Contact _____

Phone _____ Relationship _____

How did you hear about our program?

New York Yoga website

Other website _____

Friend

New York Yoga studio

Class Pass

Other _____



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QUESTIONNAIRE

[please attach a separate page if necessary]

1. How long have you been practicing yoga?
2. How often do you practice? How many times per week and for what duration?
3. Do you practice at home? How often?
4. What aspects of yoga do you practice?
Asana Pranayama Meditation Chanting Restorative Other
5. If you meditate, for how long and over how many years? Which technique do you practice?
6. Please list most influential yoga teachers and styles. How often and for how long have you studied with them?



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7. What schooling or training have you had that would provide a useful background or would be an asset to you in your teacher training? (e.g. massage or other bodywork, other movement studies, medical/anatomical study or training, teaching in other disciplines, university degrees, etc.)

8. Why do you practice yoga?

9. Do you have any pre-existing injuries that may affect your ability to participate in this course?

10. What do you feel is the role of a yoga teacher? What prerequisites do you believe are necessary to qualify as a yoga teacher?



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AGREEMENT TO THE TERMS OF NEW YORK YOGA 200-HOUR TEACHER TRAINING

I understand that, upon fulfilling all requirements of New York Yoga's Teacher Training, I will receive my 200-Hour Teacher Certification and that New York Yoga's curriculum follows the criteria established by Yoga Alliance for certification at the 200-Hour level.

I further understand that, should I fail to meet all of the requirements for the certification for any reason, I may be permitted to "retake" the missed elements of the program at an additional cost.

If medical or unusual circumstances prevent me from completing my training or satisfying my requirements, I may request special consideration to complete missed parts of the program at no additional cost. Medical documentation will be required in such instances.

I understand that New York Yoga will not release my certificate until all requirements are completed.

I understand that New York Yoga reserves the right to ask me to leave the program at any point if my behavior is destructive, inappropriate, and unethical or violates the Yoga Alliance ethical guidelines. In these circumstances, I understand that all amounts paid will not be refunded.

I understand that all payments are nonrefundable.

I understand that all New York Yoga Teacher Training materials, written or electronic, created by New York Yoga and provided to me during the course of this program are not to be copied, reproduced, or distributed, in whole or in part, or by any means without express written consent of New York Yoga.

I understand and agree to the above.

Print Name

Signature

Date