

S A V I T R I



Y O G A S H A L

Application for 200hr Teacher Training

165 Attorney St 2D New York NY 10002

Name		
Address		
Phone- Home	Work	Cell
Email Address		
Date of Birth		
Occupation		
Medical History- Please list Illnesses: Injuries: Medications or supplements:		
Emergency contact- name	Phone	
Relationship		
Length of time practicing yoga		
School of Yoga		
Styles of yoga practiced		
What inspires you to take TTC		
What do you wish to take from the course		
Payment* Cash, checks, debit or credit cards Please make checks out to: Savitri Yoga Shal Credit card payment Card type: Name on card: Card number: Expiration date: CVV code (3 to 4 digit-code on back of card): Billing address:		
*Please place a \$500 deposit to secure your spot. Your final balance is due paid in full one week prior to the course (May 14, 2011).		

Cancellation policy

1. Cancellation before the start of the course: 4 weeks prior – full refund, 3 weeks prior – 50 percent refund will be given, 2 weeks prior – no refunds given

General Rules

The yoga teacher training course is a spiritual practice under the guidance of Yogi Charu. This course is intensive and requires sound physical and mental health. For any questions, please contact savitriyogashal@gmail.com

1. Attendance at all classes, lectures and meditation is mandatory. If a class or meditation cannot be attended, please provide adequate notice to staff. Frequent absence may lead to not receiving certification for the course.
2. Mandatory weekly attendance of one asana and one meditation class in addition to the weekend training with Yogi Charu.
3. Alcohol, tobacco, meat, fish, eggs and coffee should be removed from lifestyle for the duration of the course.
4. If you have any medical problems, please let us know when you enroll, all medical history is confidential
5. Reading materials and kriya kit (cleansing kit) will be supplied by participant (details for books and supplies on syllabus).

Please read and sign below

As a participant of the Savitri Yoga Shal Teacher Training Course, I pledge to attend all activities. I am fully responsible for myself and my health. I will strive towards Self-realization according to the yoga teachings of Yogi Charu. I am aware of the fact that by ignoring the above mentioned rules and regulations I can be asked to leave the course. The fee will under no circumstances be refunded. The decision to participate in the activities is my own and is my own responsibility.

NAME: _____

SIGNATURE: _____

DATE: _____