

# 200 Hour YTT Registration

Thank you for choosing Halifax Yoga as your school for higher learning. We are honored to be given this opportunity to study and learn together. Let's get started!

## To register for our Yoga Teacher Training program:

Please complete and submit the registration form below by email to [sherry@halifaxyoga.com](mailto:sherry@halifaxyoga.com) and submit your processing fee of \$50 along with a deposit payment of \$500.00 to activate your registration (Pay online, by credit card or by check). Once accepted into the program the \$500 deposit will be deducted from the tuition and is non-refundable.

Your application form will be reviewed immediately and you will be notified of approval within 3-5 business days. Please submit your application early to ensure a spot in the program.

Alternatively, you can download the printable version of our application form, and bring or mail it to Halifax Yoga, 7 Purcell's Cove Road, Halifax NS, B3N 1R2. Please include your deposit and your processing fee.

## Payment Plan Options

Our intention is to ensure that your finances are never in the way of fulfilling your dreams. Please contact us by email [sherry@halifaxyoga.com](mailto:sherry@halifaxyoga.com) to discuss individual payment plans.

## Your Information

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone (home & cell) \_\_\_\_\_

Email Address \_\_\_\_\_

Birthdate: DD/MM/YYYY \_\_\_\_\_

Occupation \_\_\_\_\_

## Emergency Contact

Contact Name \_\_\_\_\_

Telephone \_\_\_\_\_

## Is there anything about your health that would limit you taking part in this training?

Please Describe \_\_\_\_\_

\_\_\_\_\_

Are you taking any prescription medication and if so what?

\_\_\_\_\_

## Teacher Training Questionnaire

How did you hear about Halifax Yoga Teacher Training?

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What style of yoga do you practice and how often?

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How many months/years have you been practicing? \_\_\_\_\_

Is there a particular teacher or teaching style that you prefer?

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Are you planning to teach upon completion of this course, or is this intended for personal development?

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Do you have a daily meditation practice? \_\_\_\_\_

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Are there any specific areas of interest that you would like to explore in this particular course?

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What are your goals/expectations for this training? What do you hope to achieve upon completion of this course?

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## Certification Criteria:

Certified Power Yoga Teachers from Halifax Yoga must possess the skills and abilities necessary to safely and competently teach Power Yoga.

We reserve the right to withhold certification from any student who fails to develop these skills.

Every attempt will be made to provide input throughout the program about teaching deficits that might impede certification. Program instructors will use the following criteria to establish student eligibility for certification:

1. **Practice Teaching:** Throughout the program participants will be asked to teach. All aspects of the student's performance will be graded including timing of the class, sequencing, safety, physical assists, etc.
2. **Attendance:** Once the YTT program has begun there are no refunds or changes. Concessions can be made for medical reasons with a doctor's note.

If students miss time during the YTT program, content must be made up from other participants. Students are required to make up the hours missed by attending and paying for another program at Halifax Yoga or with a Certified Yoga Alliance teacher as approved by Sherry. If fewer than 10 hours are missed these hours can be made up by attending additional classes at Halifax Yoga at the participant's expense. When hours missed exceed 10 hours then additional hours must be made up at a program or workshop. These hours would be paid at an additional expense to the student. Participants must make up these hours and the content in order to receive their certificate of completion.

## Tests:

Students will be required to write tests from time to time. Students who receive less than 70% will be required to re-take the test or demonstrate that they understand the material.

## Agreement:

I have read and understand all the above criteria for certification as a Power Yoga Teacher through Halifax Yoga Studio. I agree to meet all requirements outlined in this document.

NAME: \_\_\_\_\_

PLEASE PRINT: \_\_\_\_\_

DATE: \_\_\_\_\_