

MICHELLE VAN LARE YOGA SCHOOL

APPLICATION:
125 Hour Teacher Training Module
Hatha Vinyasa Teacher Training - 200 Hour Level

Personal Information

Name _____

Address _____

City/Postal Code _____

Home
Phone _____

Mobile
Phone _____

E-Mail
Address _____

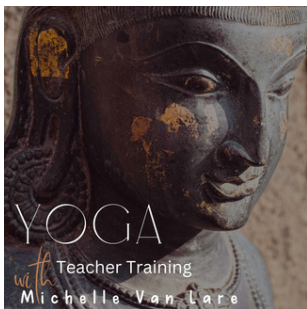
Date of Birth _____

Emergency Contact
Name _____

Phone _____

E-Mail
Address _____





MICHELLE VAN LARE
YOGA SCHOOL

Yoga Experience

Years of Practice/Teaching _____

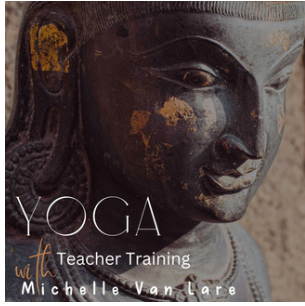
Styles/Teachers of Interest _____

Are You Currently Teaching?

Any physical injuries / issues or diagnoses of mental illness / emotional health concerns or medication taken for emotional support you wish to share?

What would you like to gain from this training? Any additional comments or expectations, please share so I may do my best to accommodate your aspirations.





MICHELLE VAN LARE YOGA SCHOOL

Code of Conduct

I, Michelle Van Lare, Lead Yoga Teacher & School owner, acknowledge the sensitive nature of the practitioner-teacher relationship and that ethical behaviour is the foundation of both yoga teacher training and practice. I believe that it is the responsibility of the Professional Yoga Teacher to ensure a safe and protected environment in which a practitioner can grow physically, mentally, and spiritually.

Upon completion of this Teacher Training Module, Graduates are emboldened to adhere to the guidelines as set out by the Yoga Alliance.

Please read & initial that you have reviewed and understand these Codes of Conduct:

<https://www.yogaalliance.org/AboutYA/OurPolicies/CodeofConduct>

Initial: _____

Prerequisites: Preference is that applicants have been practicing regularly for 1+ years, however I appreciate many practitioners attend to deepen their own practice and will consider this based on each Applicant's objective.

Module Cost: \$1800 total

Registration Fee: A non-refundable registration deposit of \$300 is due upon acceptance to the program. Application to the program is free.

Balance Due: The remaining tuition is due on the date of course commencement. Please contact me for payment plan options if needed.

Acceptance: Once approved and your deposit is confirmed, I will send you a receipt/statement, and the Course Outline.

Payment by e-transfer: michvanlare@gmail.com

Signature & Date

Name (print) _____

Signature _____

Date _____

Thank you kindly, Namaste.