

# HeartWork Yoga Teacher Training School 240 Hour Teacher Training Certification/Advanced Yoga Study Program Registration



Recognized as a Registered Yoga School through Yoga Alliance at the 200 hour level

Disclosure Statement: HeartWork Studio is licensed as a private career school with the Minnesota Office of Higher Education pursuant to Minnesota Statutes 141.2 to 141.32. Licensure is not an endorsement of the institution. Credits earned at the institution may not transfer to all other institutions.

### Send this application to:

HeartWork Yoga Studio Teacher Training Program  
Attn: Amy Etzell  
101 West 5<sup>th</sup> Street, #1  
Northfield, MN 55057

You may also fill out the information in a word document and email it to:  
[amy@heartworkyoga.com](mailto:amy@heartworkyoga.com)

Include your payment with your registration. A minimum deposit of \$400 is needed to reserve your space. We will notify you of our receipt of your registration by email. If you do not hear from us you may check on your registration by calling 507-649-0898 or by emailing [amy@heartworkyoga.com](mailto:amy@heartworkyoga.com).

The cost of the 240 hour program is \$2,590. There is a \$400 deposit due at the time of registration. If the balance is paid in full by the first day of class you will receive a \$200 discount. You may also pay 8 monthly payments of \$274 (after the \$400 deposit). We accept check, cash, or credit cards (not American Express) for payment. Currently there are no scholarships available.

Note the method you would like to pay in: \_\_\_\_\_

Class applying for:

\_\_\_\_\_ September 2010 start (meeting in September, October, November, January, February, March, April, and May)

Name: \_\_\_\_\_ Date: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Birthday: mo/day/year: \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Emergency Contact Information:

Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

Please describe yourself and your history with yoga:

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Why have you decided to take this teacher training program? \_\_\_\_\_

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How did you get started practicing yoga? \_\_\_\_\_

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Do you currently teach yoga? If yes, what style and in what environment?

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How has yoga affected or changed your life? \_\_\_\_\_

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If you are planning on teaching yoga, what other interests/life experiences do you have that will contribute to your teaching? \_\_\_\_\_

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What are your expectations and what do you hope to gain from this experience?

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Is this your first teacher training? If no, please list your prior teacher trainings:

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**Medical History:**

Please complete the medical history section below so that we can be aware of special needs you may have.

How would you evaluate your current health?

\_\_\_\_ Excellent

\_\_\_\_ Fair

\_\_\_\_ Good

\_\_\_\_ Some Challenges: (briefly describe):

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Do you suffer from any chronic conditions? \_\_\_\_\_

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Are you currently or during the last two years have you been under the care of a physician or mental health care professional?

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Is there anything we should be aware of on a health standpoint about you?

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Do you have any conditions where you must alter your yoga practice to accommodate your needs? (High blood pressure, diabetes, obesity, heart problems, eye conditions, etc): \_\_\_\_\_

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**Buyer's Right to Cancel**

Each student will be notified of acceptance/rejection in writing. In the event a student is rejected, all tuition, fees and other charges will be refunded.

Notwithstanding anything to the contrary, if a student gives written notice of cancellation within five business days of the execution of the contract or day on which the student is accepted, then a complete refund is given regardless of whether the program has started.

If a student gives a written notice of cancellation after five business days of the execution of the contract or day on which the student is accepted, but before the start of the program by the school, then all tuition, fees and other charges, except 15 percent of the total cost of the program (15 percent not to exceed \$50.00) shall be refunded to the student.

If a student gives written notice of cancellation after the start of the period of instruction for which the student has been charged, but before completion of 75 percent of the period of instruction, then student is assessed a pro rata portion of tuition, fees and all other charges based on the number of days in the term plus 25 percent of the total program cost (25 percent not to exceed \$100.00.)

Any notice of cancellation shall be acknowledged in writing within 10 business days of receipt of such notice and all refunds shall be forwarded to the student within 30 business days of receipt of such notice.

This refund policy is not linked to any student conduct policy and any promissory instrument shall not be negotiated prior to the completion of 50 percent of the course.

Written notice of cancellation shall take place on the date the letter of cancellation is postmarked or, in the case where the notice is hand carried, it shall occur on the date the notice is delivered to the school. The date of execution of the enrollment agreement shall be presumed to be the date of delivery of the notice of acceptance: and if delivered by mail, the postmark date of the letter of acceptance.

Disclosure: This agreement is a legally binding instrument upon written acceptance of the student unless cancelled pursuant to the Buyer's Right to Cancel.

*I understand that participation in this activity is completely voluntary. I hereby waive and release HeartWork Studio, its teachers and staff of any liability in case of an accident.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_