

Applicant Name:	
Date of Submission:	
Deposit Paid:	
YTT Dates:	

## Teacher Certification Application

Please complete the registration application with as much detail and information as possible and return the form via email or in person to Tree of Life.

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- 1. What is your profession? Are you utilizing your most natural skills and abilities with this profession?
- 2. What is your current state of health? List all health ailments, if any.
- 3. Do you have any injuries (past or present)? Please describe.

4. Are you currently on any medications? If so which ones and what for?

5. Describe your yoga experience and current practice? Include how long you have been practicing, with who, and any teaching experience you may have.

Thank you for your time, attention to detail				
Signa	ture	Print Name		
<u>ibeach</u>		and commitment required for the program, please email Micki at tions or concerns before enrolling in the program. I have read and agree to the		
a refundamente of with yourly	nd. Be sure you can attend ALL train can be missed. You will need to con our individualized needs, which will	yment is non-refundable. Not being able to attend trainings does not necessitate nings, they are non-refundable. If an emergency arises, up to 3 sessions and no ntact Micki Freeze and discuss your situation. We will make every effort to work include make up sessions. Private sessions for making up modules are billed at an attend the missed module during the next training course. Be aware this will delay		
*There is an \$850 deposit required upon application submission and can be paid with cash, check or credit card in order for us to hold a space for you, print student manuals and prepare all your course materials. <u>Cancellation &amp; Attendance Policy – NO EXCEPTIONS:</u>				
10.	. Is there anything else you would I	like to share, or any further questions or concerns?		
9.	How will you meet the financial re	equirements? Do you prefer an installment plan or up front payment?		
8.	What are your biggest challenge	es in life?		
7.	How will you make the time for a	daily practice/study?		
6.	What is your immediate and long	g term intention/goal for applying for this program?		

and willingness to allow Tree of Life to lead you in your 200 Yoga Teacher Certification!



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