



## APPLICATION INSTRUCTIONS

### Application Deadlines

We strongly encourage you to apply before the early registration deadline, six weeks before the training begins. Last minute applications will be accepted if there is space in the program.

### Application Instructions

Please print this form and complete all required information in the application below. Submit the application, required materials and the non-refundable \$500 application fee/deposit. *Please make checks payable to Maitri Yoga.*

Submit the completed application by emailing it to [mindy@yogamaitricenter.com](mailto:mindy@yogamaitricenter.com) with the subject: Application for Essential Yoga Training, hand deliver to the center or mail it to:

Maitri Yoga  
Attention: Teacher Training Department  
9000 W 88<sup>th</sup> Ave.  
Westminster, CO 80005

### 250 Hour Essential Yoga Training application requirements:

- 250 Hour Essential Yoga Training Application
- Payment Information & Program Participation Agreement

Once your application and deposit are received your package will be closely reviewed. The director of the School, Mindy Arbuckle, will contact you for an in-person or telephone interview before full acceptance to the program. Your deposit will be held until full acceptance into the program.

### Tuition

Cost summary for the Maitri Yoga 250 Hour Essential Yoga Training Program:

Tuition	\$1,900
Application/Registration Fee	\$ 500 (this deposit is non-refundable)
Books/Supplies (provided)	\$ 300 (Non-refundable once received & Subject to cost change)
Retreat Room & Board	<u>\$ 500</u>
 Total Cost of Program	 <u>\$3,200</u>

**The Application/Registration fee of \$500 is a non-refundable fee once a student has been accepted into the program. Students not accepted to the school are entitled to all moneys paid.**

Tuition includes 232.5 classroom hours, required books and manuals, homework, room and board for the retreat and certificate of completion. (The additional 17.5 hours are non-contact hours comprised of self-study, homework, and attending additional yoga classes.) Enrolled students are extended a 10% discount on all purchases made through Yoga Elevates for the duration of enrollment in the program.

Maitri Yoga's educational programs are a serious commitment for participants and teachers. Space is limited to 10 students maximum and your Application/Registration Fee is required to hold your space for the program session. To reserve your place in the training you must submit your application along with your Application Fee.



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**250 Hour Essential Yoga Training Registration Form**

The director of the program, Mindy Arbuckle, will carefully review this form. Mindy will contact you for a personal or phone interview before full acceptance into the program.

Thank you!

**ESSENTIAL YOGA TRAINING APPLICATION**

**Personal Information**

Name \_\_\_\_\_ Today's Date \_\_\_\_\_  
Date of Birth \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Email Address \_\_\_\_\_ Occupation \_\_\_\_\_

**Emergency Contact**

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Phone \_\_\_\_\_

**Program Information**

**How did you first learn about the Maitri Yoga Basic Teacher Training Program?**

- |  |   |
|--|---|
| <input type="checkbox"/> I practice at Maitri Yoga       | <input type="checkbox"/> Internet search        |
| <input type="checkbox"/> My yoga teacher recommended it. | <input type="checkbox"/> Friend _____           |
| Teacher's Name _____                                     | <input type="checkbox"/> Flyer (Location) _____ |
| <input type="checkbox"/> Other: _____                    |   |

**What month would you prefer to begin the teacher training?** \_\_\_\_\_



## About You

1. How long have you been practicing yoga?
2. Are you studying a particular style of yoga? If so, which?
3. How many days a week do you practice the following? Please add details to your practices.  
Yoga Asana  
  
Pranayama  
  
Meditation  
  
Other practices, please describe
4. Do you have a home practice? If so, please describe.
5. Have you taken any previous yoga trainings? If so, what did you study, when and with whom?



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6. Please share any other comments about your training or personal practice:

7. Why are you interested in the Maitri Yoga Basic Teacher Training Program?

8. What do you expect to learn in this yoga teacher training? What do you hope to achieve at the completion of the program?



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**9. Please describe yourself and the impact yoga has had on your life.**

**10. Are you ready and committed to pursue the practice of yoga beyond the physical postures?**

- Yes  
 No

**11. Because yoga is ultimately a journey of learning about yourself and understanding we are all one, are you open to accept what you may learn about yourself?**

- Yes  
 No

Comments on the last two questions and what you feel is your largest obstacle at this time on your path of yoga.



## Medical History

Please complete the medical history section below so that we can be sure to respond to any emergencies should they arise during your training. Please note that none of your responses would exclude you from being accepted into the program.

**1. How would you evaluate your current health?**

- Excellent
- Good
- Fair
- Some challenges (briefly describe) \_\_\_\_\_

**2. Are you taking care of any of the following?**

- Diabetes
- Pregnant, plan to become pregnant during the course of the training
- Joint replacements, if so please specify \_\_\_\_\_
- Epilepsy
- Heart Disease, please elaborate \_\_\_\_\_
- High Blood Pressure
- Surgeries \_\_\_\_\_

**3. Please list medications prescribed by a health care professional you are taking and the condition for which you taking them.**

**4. Please list any injuries you are currently working with.**

**5. Is there anything else we should know about your medical history?**



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**PAYMENT INFORMATION**

A \$500 non-refundable application fee/deposit is due with your application. This payment will be held until acceptance into the program. Full payment is required by the completion of the program. You will agree make all future payments during the program, which will be outlined in the enrollment form signed upon acceptance into the program.

- I am paying by cash.**
- I am paying by check.** Please mail the check with your application to the address listed on the Application Instruction page. *Please make your check payable to Maitri Yoga.*
- I am paying by credit card.**  MasterCard  Visa  American Express  Discover

Credit Card Number \_\_\_\_\_  
 Expiration \_\_\_\_\_ CVV # \_\_\_\_\_  
 Name as it appears on the card: \_\_\_\_\_

Is your billing information the same as your mailing address?

- Yes
- No. My billing address is:

\_\_\_\_\_  
 \_\_\_\_\_

I hereby authorize the above payment of \$ \_\_\_\_\_. Please initial: \_\_\_\_\_

\_\_\_\_\_  
**Complete Signature**

Please email your application to [mindy@yogamaitricenter.com](mailto:mindy@yogamaitricenter.com), mail to Maitri Yoga, 9000 W 88<sup>th</sup> Ave, Westminster, CO 80005, or drop your application off at the yoga center.



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**PROGRAM PARTICIPATION AGREEMENT**

I understand that if I fulfill all the requirements of the Maitri Yoga Essential Yoga Teacher Training program, including in-class hours, homework, etc., I will receive a certificate of completion, which can be submitted to the Yoga Alliance or a prospective employer as evidence that I have completed a 200 hour yoga teacher training program.

I understand the commitment I am making. I agree to follow the guidelines and requirements established for the program.

I understand that if I cancel 14 days prior to the start of the training, my deposit may be transferred toward a future Essential Yoga Teacher Training Program and will be refunded my remaining balance. If I cancel within 14 days of the training, I will forfeit my \$500 deposit but my remaining balance will be refunded. Once the program begins, the tuition is refundable according to the portion of the training completed as outline in the Course Catalog.

I understand that all Maitri Yoga Teacher Training materials are under copyright protection and cannot be reproduced by me without the permission of the author. Failure to comply may result in legal action.

I have read and accept the above terms and requirements:  Yes  No

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Signature

Date