

Rise Wellness
200-Hour Teacher Training Program Application



RISE WELLNESS

Program Dates: TBA

See brochure for full schedule, all dates and times subject to change

First Name _____ Last Name _____

Street Address _____

City _____ State _____ Zip _____

Phone number _____ Email _____

Essay Questions – attach additional sheets as needed

1. Are you taking our Teacher Training Program with the goal of teaching yoga classes or for personal enrichment? Please Explain.
2. How long have you been practicing yoga and what style do you practice? Include an explanation of your experience and background in yoga.
3. What is your current occupation and level of education outside of yoga?
4. Are you currently a yoga teacher, for how long, where do you teach and what style? Explain your Teacher Training background.
5. List any memorable yoga teachers you have studied with and why you find them exceptional.
6. Do you have a regular home yoga or meditation practice? Please describe.
7. Do you have a regular studio yoga or meditation practice, how long have you practiced and where?
8. Why do you want to take this program?

Terms and Conditions

Full Tuition: \$3150

Early Bird Tuition: \$2900

Refunds can be issued up until TBA minus a \$400 administration fee. Refunds will not be issued after this date. **There is a \$200 application fee, which will be refunded if your application is not accepted. If your application is accepted the fee will be deducted from your tuition.**

Payment plans are available, contact Ann 916.764.4388.

Release and Waiver of Liability

I, _____, hereby agree to the following:

1. That I am participating in the Yoga Classes, Health Programs or Workshops offered by Rise Yoga Studio, Inc. during which I will receive information and instruction about yoga and health. I recognize that yoga requires physical exertion that may be strenuous and may cause physical injury, and I am fully aware of the risks and hazards involved.
2. I understand that it is my responsibility to consult with a physician prior to and regarding my participation in the Yoga Classes, Health Programs or Workshops. I represent and warrant that I am physically fit and I have no medical condition that would prevent my full participation in the Yoga Classes, Health Programs or Workshops.
3. In consideration of being permitted to participate in Yoga Classes, Health Programs or Workshops, I agree to assume full responsibility for any risks, injuries or damages, known or unknown, which I might incur as a result of participating in the program.
4. In further consideration of being permitted to participate in Yoga Classes, Health Programs or Workshops, I knowingly, voluntarily and expressly waive any claim I may have against Rise Yoga Studio for injury or damages that I may sustain as a result of participating in the program.
5. I, my heirs or legal representatives' forever release waive, discharge and covenant not to sue Rise Yoga Studio, Inc. for any injury or death caused by their negligence or other acts.
6. That I am 18 years of age or older.

I have read the above release and waiver of liability and fully understand its contents. I voluntarily agree to the terms and conditions stated above. I have read, understand and agree to the information and terms regarding Rise Yoga Studio's 200 Hour Teacher Training Program, requirements, payments and refunds as stated in the above application and official brochure.

Signature _____

Date _____

Submit completed application and fee by mail or hand delivered to:

Rise Wellness
7385 Greenhaven Dr. #5
Sacramento, CA 95831

Deadline to submit application is TBA.

You will be notified by email within one week if your application is accepted.
If accepted into the program, you will be given further instructions on how to begin.

Thank you!