



8 LIMBS PRE/POSTNATAL TEACHER TRAINING Application Form

Application and Enrollment Instructions and Check List

Thank you for applying to the 8 Limbs Pre/Postnatal Teacher Training Program. We are excited to offer this unique format for yoga teachers.

Because we are a WA state licensed Vocational School we are required to have signed enrollment agreement for every participant in our trainings. The intent of this agreement is to protect you, the consumer, and provide you clarity and understanding of our policies which follow the state's requirements. Please contact us if you have any questions about the form.

If you are not accepted to our program for any reason, we will return your registration fee. If you are accepted and decide not to participate, we do retain this fee for processing your application.

Application/Enrollment Check list:

- 8 Limbs Pre/Postnatal Application Form*
- Signed WA State Vocational School Enrollment Agreement
- \$25 application fee
- Headshot (to help us familiarize ourselves with you)
- Copy of your 200 RYT Certificate or proof of certification

Application Process:

- Our program offers rolling enrollment. You may join us at any time but must allow a minimum of two weeks for the application process prior to your first training module.
- You will be notified by 8 Limbs of your acceptance status within two weeks of submittal of this application.
- You may register for individual modules once you've received your notice of acceptance.
- All workshops are paid for individually. Thus you are paying as you go for workshops regardless of whether you actually complete your training or not.
- Full module payment is required to secure your spot.

Mail or drop off your application to:

8 Limbs Yoga Centers
Attn Pre/Postnatal Teacher Training
500 East Pike St.
Seattle, WA 98122

*Please also email a copy of the Application Form and headshot (if possible) to: annephyfe@8limbsyoga.com and prenatal@8limbsyoga.com No other forms need be emailed.

www.8limbsyoga.com



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Personal Information

Name _____ Today's Date (M/D/YYYY) _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Work/Cell Phone _____

Email Address _____ Occupation _____

Emergency Contact Name: _____ Phone _____ Relationship _____

How did you first learn about the 8 Limbs Pre/Postnatal Teacher Training Program

- 8 Limbs Website Seattle Yoga News Internet Search My Yoga Teacher
- 8 Limbs Email Yoga Alliance Friend Other

Application Questions (please answer on a separate page)

- Why are you participating in this training and what do you hope to gain from it?
- Why do you want to teach pre/postnatal yoga?
- What is your related background (include experience as a yoga instructor, and any study/experience related to pregnancy, birth, or postnatal care)?
- Where did you complete your 200-hour Training?
- Have you taken any other significant trainings or Intensives that will support your teaching in this capacity (Anatomy, Trauma Care, Doula Training, Yoga for Women, etc)?
- What book(s) or other media have you consulted in studying this population?
- What is your intended start date for this training (or intended first training module)?

Payment Information

\$25 non-refundable registration fee is due to start you on our program.

___ I am paying by check. Please mail the check with your application to the appropriate address on the Application Instruction page.

___ I am paying by credit card. MasterCard Visa

Credit Card # _____ Expiration Date _____ Name as it appears on the card: _____

Is your billing information the same as your mailing address? Yes No. My billing address is:

Address Line 1 _____

City _____ State _____ Zip Code _____

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