

# 8 LIMBS 500-HOUR TEACHER TRAINING

## Application Form

### Application and Enrollment Instructions and Check List

Thank you for applying to the 8 Limbs 500-hour 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:

- 500-hour Application Form\*
- Signed WA State Vocational School Enrollment Agreement
- \$100 application fee
- Headshot (to help us familiarize ourselves with you)
- Copy of your 200 RYT Certificate or proof of certification

### Application Process:

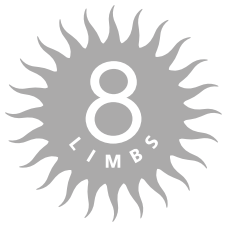
- Our program offers rolling enrollment. You may join us at any time but must allow a minimum of two weeks for the application process prior to your first training module.
- You will be notified by 8 Limbs of your acceptance status within two weeks of submittal of this application.
- You may register for individual modules once you've received your notice of acceptance.
- All workshops are paid for individually unless you opt for our discount for full payment. 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 500-hour Teacher Training  
500 East Pike St.  
Seattle, WA 98122

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

**8limbsyoga.com**



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## Application Form

### 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 500-hour 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)

- How long have you studied yoga? List styles and main teachers.  
 Where did you receive your 200-RYT certification and when?  
 Do you currently teach yoga? If so, how often and what level?  
 Have you taught yoga related workshops, series classes, or yoga retreats?  
 Do you have experience teaching in any others field(s)? List other training or experience relevant to yoga and/or teaching?  
 What motivated you to become a yoga teacher and what keeps you motivated?  
 Please describe your home practice.  
 Please share 3-5 of your favorite yoga books and why they have been valuable to you.  
 List all injuries or illnesses and how they affect your current condition.  
 Why are you participating in this training and what do you hope to gain from it?  
 What is your intended start date of this training (or intended first training module)

### Payment Information

**\$100 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: \_\_\_\_\_

**8limbsyoga.com**