

Qi Yoga Teacher Training Course Registration Form: 2017

Welcome to the Yoga Teacher Training program at Qi.
We look forward to undertaking this journey with you over the next year.

Please complete this registration form and return to Qi with your deposit. All personal details contained here will only be seen by the course teachers and will not be shared in any other way.

Last Name:	First Names:
Name You like to be called:	Date of Birth: Age:
Address:	<div style="text-align: right;">Contact details</div> Home tel: Mobile: Email:
TEACHER TRAINING 2016	
<p style="text-align: center;">Teacher Training Payment Options</p> <p>a) Early Bird: full payment by 31/12/16 \$6,225 (You may pay \$600 deposit and balance by 31/12/16) OR</p> <p>b) \$600 non-refundable deposit. We will refund your deposit if you withdraw more than 2 months from the start date. A 50% refund may be possible up to 2 weeks prior to start date.</p> <p style="text-align: center;">+</p> <p>Full Payment \$1540 per term 1st instalment by start of term 1 YES / NO</p> <p>Date Deposit Paid: <small>(This deposit is deducted from any payments for your final term)</small> Payment via credit card call 9976 6880 or via direct transfer to BSB: 062 197 Account: 10268120 state name + TT on transaction</p>	<p>c) Instalment plan 4 x \$405 per term YES / NO +</p> <p>\$600 non-refundable deposit. We will refund your deposit if you withdraw more than 2 months from the start date. A 50% refund may be possible up to 2 weeks prior to start date.</p> <p>Date Deposit Paid: <small>(This deposit is deducted from any payments for your final term)</small> Payment via credit card call 9976 6880 or via direct transfer to BSB: 062 197 Account: 10268120 state name + TT on transaction</p>
How did you hear of this course?	

DEPOSIT DISCLAIMER: The deposit of \$600 to enrol for the course is non-refundable if you do not complete the course. The deposit is deducted from fees for the last term Please sign your understanding of this:

SIGNED by STUDENT:

DATE:

ADJUSTMENT DISCLAIMER: It's part of Yoga practice to have interaction between teacher & student in the form of adjustments of alignment and balance to ensure your safety. You must be responsible for yourself and accept that the teacher's guidance and instruction is from an educated and informed background. Please sign to show you understand this information:

SIGNED by STUDENT:

DATE:



Registration Form

1. YOGA BACKGROUND: To help us gauge your experience and starting point within the group, please provide as much information as you can.

How long have you practiced Yoga? (MINIMUM 2 years required to enrol)	
How often do you practice each week?	
Brief summary of previous Yoga courses, workshops, styles of yoga, teachers or any other relevant experience.	
What do you love most about your Yoga practice?	
What do you avoid most in your Yoga practice?	

2. MEDITATION BACKGROUND:

Do you meditate regularly? How often?	
How long have you been meditating?	
What meditation techniques have you been taught?	
Briefly describe your experience or attitudes towards meditation	

3. RELIGIOUS or SPIRITUAL BELIEFS

Do you follow a particular Religion or Doctrine? If so what?	
How important is a Spiritual path in your daily life? How does it affect your life?	



4. HEALTH BACKGROUND

<p>Do you have a history of any physical ailments we should know about? Please note any problems, injuries or recent operations.</p>	<p>Spine Knees Shoulders Neck Asthma High or Low Blood Pressure Glaucoma Are you pregnant Other:</p>
<p>Please indicate any mental health history or past treatments, and list any medication you are taking currently. Please be honest!</p>	

5. REASONS FOR TAKING THIS COURSE

<p>Describe briefly your aims and goals from doing this course, to help us understand what you need from the teaching.</p>	
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6. CONFIDENTIALITY DISCLAIMER

Sometimes during a course of this nature personal experiences and issues may arise. It is important that everyone feels safe to express their feelings honestly and feel supported. We ask you to sign this disclaimer as a requirement to participate.

"I understand that I will not share any personal information, experiences or details concerning other course participants outside of the course room. What happens in the room stays in the room." **SIGNED:** **DATE:**

Postal Address:
Qi Health & Yoga
9 The Corso
Manly
NSW 2095

Course Venue:
Qi Freshwater
2 Moore Rd (Cnr Albert Street)
Freshwater
NSW 2096

Email: qi@qiyoga.net

Telephone: (02) 9976 6880

