

iThriveYoga

Teacher Training Program

awaken your practice

unlock your potential

inspire others



Deepen your practice and understanding of yoga

The iThrive Yoga 200-Hour Yoga Teacher Training program is designed to take your personal practice to a whole new level and provide you with the skill set to offer students an intelligent and inspired yoga class. This course is ideal for serious students and aspiring teachers. Some people choose to take the training to deepen their yoga practice. Others take it to become teachers. The choice is yours!

In this training you will learn:

- Proper alignment, benefits, and risks of the foundational yoga postures
- Principles of anatomy and how they apply to each posture
- The science and art of sequencing a yoga class
- Hands on adjustments
- How to observe and see bodies
- The art of the voice
- Confidence through practice teaching
- Yoga history and philosophy
- Sanskrit names of the postures

This foundational yoga training is designed to give you a transformational experience. You will gain a deeper understanding of all things yoga and become part of a likeminded community. For those who want to teach, this will mark the beginning of an amazing journey as a yoga teacher.

Graduates will be able to register with Yoga Alliance at the RYT-200 Level.



General Information

Dates and Times of the Training:

Starting Fall 2017!

Typical Class Times:

Module 1-4: Tuesday and Thursday evenings, 5:30-9:30 PM and Saturdays, 12:00-5:00 PM

Module 5: Tuesday and Thursday evenings, 5:30-9:30 PM and Saturdays & Sundays, 12:00-5:00 PM

200 Hour Breakdown of Hours

100 hours: Training Techniques

30 hours: Teaching Methodology

20 hours: Anatomy & Physiology

30 hours: Yoga Philosophy & History

20 hours: Practicum

200-Hour Program Tuition

A \$500 deposit and your completed application holds your spot in the training

\$3,000 – for all 5 modules

\$500/modules 1-4

\$1,000/module 5

FAQ

How proficient in yoga do I have to be to do the program?

Although not required, we recommend that applicants have approximately a year of consistent yoga practice prior to taking the training. If you have a basic understanding of fundamental yoga postures then you likely will be adequately prepared. A yoga student comes to the mat with a level of maturity, a willingness to learn, and an understanding of the limits of her/his body. Keep in mind that this training is for aspiring teachers as well as for people who only want to deepen their practice.

When will I find out if I have been accepted into the program?

After you submit your completed Teacher Training Application, you will be contacted via email regarding your acceptance. Your payment will be processed upon acceptance. If you are not accepted into the program, the Teacher Training Coordinator will suggest a pathway that will help you prepare for a future teacher training.

Do you offer scholarships or work-exchange?

iThrive Yoga offers a limited number of partial scholarships each year to prospective students with exceptional circumstances. For a partial scholarship, iThrive Yoga offers up to 50% discount off the full tuition in exchange for 100 hours of a work-exchange position. Positions range from being an In-Training Assistant (ITA) to marketing and retail assistance. To apply for a scholarship, please contact the Teacher Training Coordinator for an application. Spaces are limited & not guaranteed to be available for every session.

How much time should I expect to spend on homework?

Expect to spend between 8 to 10 hours per week on reading assignments. The homework is designed to support the material covered in class and help you integrate what is presented into your own practice and teaching. If you are not planning on teaching after this course, you may choose not to complete all of the homework assignments and take the course for non-credit. However, if you wish to receive your Certificate of Completion for the course, you must attend all the sessions and complete all the homework assignments.



FAQ (continued)

What is the Yoga Alliance?

Yoga Alliance is an organization that was started in 1999 as a way to create nationally recognized standards for yoga teachers and yoga teacher trainings. More and more yoga studios across the country are requiring their teachers to register with the Yoga Alliance, either at the 200 or 500 hour level. Yoga Alliance registration, however, is not a legal requirement for teaching yoga. Currently there are no legal certification requirements to be a yoga teacher.

Will I be qualified to teach yoga once I complete the 200-Hour Teacher Training Program?

Yes! With the successful completion of all the requirements of the program, including contact hours, homework, and exam, you will receive your Certificate of Completion evidencing your training at the 200-Hour Level. You may also register with the Yoga Alliance (www.yogaalliance.org) at the RYT-200 level (Registered Yoga Teacher 200). Graduates of the 200-hour program usually begin teaching in small studios, gyms, with private clientele (friends and family), etc.

What if I want to teach at iThrive Yoga?

iThrive Yoga seeks a diverse, committed, well-trained faculty, who uphold our high standard of quality for safe, effective, accessible teaching in the field of yoga. After completing our teacher training program, you may ask to be connected with a mentor teacher who will help you further prepare for teaching at iThrive Yoga. When your mentor feels you are ready, she/he will recommend that you be given a graduate teacher class on the schedule.

How To Apply for Training

Thank you for your interest in the iThrive Yoga Teacher Training Program! Below you will find detailed instructions on how to apply. We recommend that applicants have completed approximately a year of consistent yoga practice. If you have not been practicing yoga for about a year, please provide us with an explanation on a separate sheet of paper.

Application Process

To reserve a place in the training you must submit a completed application along with a \$500 deposit. In order to receive the early registration price, your payment must be made in full by the early registration date. Enrollment is limited and we may accept last minute applications only if there is space in the program.

A complete application consists of the following three documents:

1. Primary Application, pages 1-3
2. Payment & Program Participation Agreement, page 4
3. Assumption of Risk, Health Warranty, Release and Waiver of Liability, page 5

How to Submit your Application

Hand-deliver or mail your Teacher Training Application to iThrive Yoga, 10233 South Parker Road, Suite 107, Parker, CO 80134.

Do You Have Questions?

We're here to help! Feel free to contact any of the following people to get your questions answered.

Beth Meier, Founder of iThrive Yoga - 303-840-5454, beth@ithriveyoga.com

Melissa, Lead Teacher Trainer - 303-840-5454, mgkg@comcast.net



200-HOUR TEACHER TRAINING APPLICATION

Personal Information

Name: _____ Today's Date: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work/Cell: _____

E-mail Address: _____ Occupation: _____

Emergency Contact:

Name	Phone	Relationship

Check this box if you are taking this teacher training program mainly to deepen your practice and don't plan to seek employment in the field of yoga

Referral

Did someone refer you? If so, we would like to thank them! Please list their name below

I was referred by: _____
My Teacher My Friend Other: _____

If not referred, how did you hear about the Ithrive Yoga Teacher Training?

<input type="checkbox"/> In-studio signage	<input type="checkbox"/> Google Search
<input type="checkbox"/> IThrive Yoga Email	
<input type="checkbox"/> iThrive Yoga postcards in the community Where?	_____
<input type="checkbox"/> Other. Can you please share with us Where?	_____

Medical History

Complete the medical history section below so that we can be sure to respond to any emergencies should they arise during your training. Include a second sheet if necessary. Safety is very important to us. Based on your specific history we may schedule a follow-up interview before accepting you into the program. Please note that at any time your trainer(s) may ask you to leave if you are not at the physical and/or health level to fully and safely participate, or if you are affecting the safety and learning of others.

1. How would you evaluate your current health?

_____ Excellent

_____ Good

_____ Fair

_____ Some challenges (Briefly describe) _____

2. Do you have any injuries that may affect your ability to fully participate in the training? Describe.

3. List any medical conditions that may affect your ability to fully participate in the training.

4. Have you had any surgeries in the last year? If yes, please explain.

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

About You

To better serve you, it is important that we have a general picture of your yoga practice and history. Please be as honest and as clear as possible. None of your answers will automatically exclude you from our training.

1. How long have you been practicing yoga?

2. How many days per week do you practice yoga?

3. What style of yoga do you usually practice?

4. At which yoga studios do you currently practice?

5. Who have been your primary teachers, past & present?

6. Do you have a home practice?

Yes

No

7. Do you practice meditation and/or pranayama?

Yes

No

8. Do you practice inversions?

Yes

No

9. Do you practice Surya Namaskar (Sun Salutation) A & B?

Yes

No

10. Do you practice chaturanga?

Yes

No



11 Is this your first yoga teacher training?
If no, please specify:

Yes No

12 Are you currently teaching
If yes, how many years & where?

Yes No

13 What areas of yoga challenge you the most (please specify)?

14 Why do you want to take a iThrive Yoga Teacher Training program and what are your expectations?

15 What do you hope to achieve at the completion of the program?



PAYMENT INFORMATION

The first \$500 of your tuition is your deposit and it is due with your application. The remaining balance of your payment is required no later than the start of the program. Your payment is due in full by the early registration date in order to receive the discounted rate.

I am paying by check.

Include driver's license number, state and expiration date on the front of your check.

I am paying by credit card. MasterCard Visa American Express

Credit Card # _____

Expiration Date _____

Name as it appears on the card: _____

Is your billing information the same as your mailing address? Yes No

If no, provide your billing address _____

City

State

Zip Code

I hereby authorize a payment of \$ _____ Your Initials: _____

PROGRAM PARTICIPANT AGREEMENT

I understand that if I am paid in full and fulfill all the requirements of the iThrive Yoga Teacher Training, including in-class hours, homework, quizzes and passing both the written and in-class final exams, I will receive a letter of completion, which can be submitted to the Yoga Alliance or a prospective employer as evidence that I have completed a 200-hour Teacher Training program. Paying for the program and completing the hours alone does not mean I will pass the program.

I understand that iThrive Yoga reserves the right to ask me to leave the program if I am found plagiarizing, if my behavior is disruptive, inappropriate, negatively impacting other students learning, unethical or violates the Yoga Alliance ethical guidelines. Under such circumstances I understand I will not be refunded my tuition.

I understand that iThrive Yoga reserves the right at anytime to ask me to leave the training if it appears that my health or physical practice are not at the level to fully participate in the training. Under such circumstances I understand I will be given a prorated refund, based on the amount of time I have attended in the training.

I understand that if I miss over 40 hours I will receive a non-passing status and I may be asked to leave the training. Under such circumstances I understand I will be given the opportunity to retake the program at a discounted rate, subject to availability.

I understand that I am habitually tardy I will not receive credit for the days I am tardy. If I am 15 minutes late more than twice, the third time I will be required to make up the day according to the makeup policy. If I leave 15 minutes early more than twice the third time, I will be required to make up the day according to the makeup policy.

I understand that if I cancel 14 days prior to the start of the training, my deposit may be transferred toward a future Teacher Training and I will be refunded my remaining balance. If I cancel within 14 days of the start of the training, I will forfeit my \$500 deposit but my remaining balance will be refunded. Once the program begins, tuition is non-refundable and non-transferable.

I understand that all iThrive 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 **Your Initials:** _____



ASSUMPTION OF RISK, HEALTH WARRANTY, RELEASE AND WAIVER OF LIABILITY

Yoga is an individual experience and I understand that I should progress at my own pace while participating in the physically active portions of the iThrive Yoga 200-Hour Teacher Training Program. If at any point I feel overexertion or fatigue, I will respect my own body's limitations and I will rest before continuing Yoga or any other exercise.

I acknowledge that participation in the iThrive Yoga 200-Hour Teacher Training Program naturally involves the risk of injury to me. I further acknowledge that specific risks include injuries resulting from over-exertion, physical adjustment, improper or negligent use of equipment, failure to follow trainer instructions, or injuries resulting from participation in an inappropriate level of physical exercise. As such, I understand and voluntarily accept these risks.

I represent that I am in good health, at least 18 years of age, have the necessary current medical approval to engage in physical exercise and yoga instructional classes and teacher training and have no disability, impairment, injury, disease or ailment which would cause risk of injury or adverse health consequences as a result of engaging in physical exercise and yoga instructional classes and teacher training. I acknowledge that to the facility where I am taking my training and iThrive Yoga are relying on this representation and I understand that neither to the facility where I am taking my training nor iThrive Yoga will investigate or certify my health or my fitness to participate in physical exercise and yoga instructional classes and teacher training.

RELEASE AND WAIVER OF LIABILITY: In consideration for my participation in iThrive Yoga 200-Hour Teacher Training Program, I, individually, and on behalf of my relatives, legal representatives, and assigns, agree not to sue and hereby agree to defend, indemnify, release and hold harmless to the facility where I am taking my training and iThrive Yoga and each of their respective shareholders, owners, officers, directors, members, employees, contractors and agents (collectively, the "Facilities") where the 200-Hour Teacher Training Program occurs (collectively, the "Releasees") from all actions, claims, demands, suits, losses, liabilities, charges, expenses (including, without limitation, attorneys' fees), and costs of any nature whatsoever which may arise out of, relate to, or result from, any injury, economic loss or any damage to me or my guest or relatives resulting from my participation in physical exercise and yoga instructional classes and teacher training at the Facilities, entry to or use of the equipment, facilities or services at the Facilities, the negligence of to the facility where I am taking my training or iThrive Yoga, anyone at the facility where I am taking my training or iThrive Yoga's behalf or anyone using the Facilities or iThrive Yoga's equipment, facilities or services, except such as may arise out of the gross negligence or willful misconduct of the Releasees. This release and waiver of liability (this "Release") is intended to be a complete release of any responsibility for personal injuries and/or property loss/damage sustained by me while at the Facilities, whether using exercise equipment, participating in active or passive exercise, or not. I understand that this Release is intended to be as broad and inclusive as is permitted by the laws of the jurisdiction applicable to the facility where I am taking my training and that if any portion of this Release is held invalid, I agree that the balance of this Release should continue in full force and effect.

Date

Signature