APPLICATION for Soul Collective 200 hr YTT

*Complete this form in its entirety and submit to Soul Stretch Yoga- online or drop off to one of our studios. Upon completion and review, you will be notified of acceptance via email and directed to a confirmation page with a link to pay your tuition.

*Please note: required reading materials for this YTT are not included in the tuition fee. Students are responsible to purchase books separately.
*Cost of the program is \$3800.00 per student. \$500 deposit is due with application. The balance must be paid in full prior to 11/1/19.

Name:			
First:	Last:		
Email:			
Phone:			
Street Address:			
City	State	Zip Code	
Marital Status: () Married	() Single		
Children: () Yes () No			
Education:			
Occupation:			
1.) How long have you been practicing yoga?			
2.) What brought you to yoga?			
3.) What does your current practice consist of?			

4.) Please list any previous yoga experience you have had over the last two years; including other teacher trainings, workshops, seminars, retreats, studio classes and types of yoga:

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Refund and Cance	lation Agreement		
X	(please ini	tial)	
I acknowledge that I I completely. I acknowl clarification of this ap am not guaranteed ac	edge that I may be c plication. I understan	ontacted via phone t d that by filling out t	for further
Agreement and Te	rms and Condition	s	
10.) We will be provid will have vegan option restrictions:			-
9.) Please list one pers	sonal reference (not re	elated to you) and th	eir contact info:
8.) How would a close supervisor describe yo	•	How would a currer	nt or former
7.) What questions or	concerns do you have	e about this program	า?
6.) Do you plan on tea	ching yoga or is this	program for self-grov	wth only?
5.) What do you hope	to gain for our teach	er training program?	

The Soul Collective YTT tuition must be paid IN FULL no later than one week prior to the program start date (11/1/19) and is non-refundable. Credit towards future Soul Collective YTTs will be given for cancellations due to personal health issues or illness only.

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Attendance Agreement I understand that once I am accepted into this teacher training 100% attendance is required. I understand that if I will miss any training sessions I will contact the Lead Teachers immediately and schedule make up sessions ir order to complete and receive teaching certification. I understand that if I miss any training without contacting the Lead Teachers, I may be asked to	I understand Soul Collective YTT's	s refund policy.
I understand that once I am accepted into this teacher training 100% attendance is required. I understand that if I will miss any training sessions I will contact the Lead Teachers immediately and schedule make up sessions ir order to complete and receive teaching certification. I understand that if I	×(please initial)
leave the training without a refund and I will not receive certification.	I understand that once I am acce attendance is required. I underst will contact the Lead Teachers im order to complete and receive tea miss any training without contact	rand that if I will miss any training sessions I nmediately and schedule make up sessions in aching certification. I understand that if I ting the Lead Teachers, I may be asked to
I have read and understand the Soul Collective YTT attendance agreement.	I have read and understand the S	Soul Collective YTT attendance agreement.
X (please initial)	X(please initial)
I understand that at the time of acceptance to this training, payment is due in full.		acceptance to this training, payment is due in
Signature and Date:	Signature and Date:	
X Date	Χ	Date

SUBMIT Button (on the website)