



Color Me Yoga For Children ® 200 Yoga School Application

Namaste!

Thank you for your interest in Color Me Yoga® Teacher Training.

Enclosed, you will find an application. In order to attend this training you must fill out an application for approval.

Space is very limited so a timely application is recommended. Deadline to register is one month before the date of the training.

Please follow the instructions below and return the application and payment to :

Color Me Yoga®
PO Box 418
Wenham, MA 01984

Please complete the application and sign the ethics agreement. Signing means you have accepted the terms of the application.

Include a \$25 non-refundable application fee with your application, with a check or money order made out to Color Me Yoga along with your deposit or complete payment . Payment must be drawn on a US Bank.

Wait for a Letter of Acceptance. Acceptance letters are sent by mail and/or email.

Prerequisite:

Six Months -one year yoga experience, in order to be accepted. This should include a minimum of six months in an ongoing yoga class rather than through books and videos, unless circumstances do not allow you to be in an active class. Studying with a yoga teacher, watching him/her interact in a group setting greatly enhances your own teaching ability. In addition it is highly recommended that you have a daily yoga practice. If you have not yet been practicing yoga at this level or have practiced for less than six months please still fill out the application and speak with the director.

During the training you will be doing many hours of active yoga practice which demands much physical, emotional and mental energy.

100% attendance is required. If you need to miss any session you must speak to the director before the session. You are responsible for any course material missed. Every day you will check off the attendance sheet. Students must be on time and complete all their hours in order to receive certification. There are take home assignments between each session, which must be completed in order to receive certification.

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Responsibility Agreement

I am responsible for my experience during Color Me Yoga® Teacher Training, part of Color Me Yoga® Enterprises, LLC. I understand that this training is demanding on every level. I understand that this training is offered for the maximum benefit to all who attend and as such the director cannot always know the specific needs of the individual student. During this program I, alone, can take care of myself and stop if need be. While I am required to attend 100% of the time it is also permitted for me to participate with my presence if I am unable to participate with my whole self. I do not, and will not, hold Color Me Yoga® Enterprises, LLC responsible for my physical and psychological care. Color Me Yoga® Enterprises, LLC will not pay for, or reimburse me for, physical or psychological care during or after this program.

I understand that during this training, I will be challenged physically, psychologically and spiritually. It is entirely up to me to know the edges of my own boundaries. I understand that Color Me Yoga® Enterprises LLC is not responsible for any physical or psychological risks I may undertake during the training.

Signed _____ Date _____

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Color Me Yoga® Ethics Agreement

Teaching Color Me Yoga® requires sensitivity, integrity, honor, honesty, respect and an attitude of humility, compassion and grace. I agree to act in such a way.

As a Color Me Yoga® teacher I agree to teach from that standpoint, always honoring the student, never stepping outside of boundaries that are inappropriate. While Color Me Yoga® **does teach assists and physical contact with students**, teachers must do so with consciousness towards safety, trust and respect.

I agree to be honest about my qualifications and to only offer services for which I am qualified. I agree to refrain from diagnosing a medical condition, or telling a student or parent to disregard his/ her doctor's advice.

I understand that if it so happens that my ethical standards are in direct violation of this agreement that my Color Me Yoga® Certification may be revoked.

Signed _____ Date _____

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Color Me Yoga® Application Form.
Please fill out in entirety.

First Name _____

Last Name _____

Address _____

City _____

State _____

Zip Code _____

Home Phone _____

Cell Phone _____

Work Phone _____

E-mail _____

Date of Birth _____

Current Occupation _____

Emergency Contact Phone Number _____

How did you find out about Color Me Yoga® School?

How long have you been practicing yoga?

Have you had a daily practice of yoga for at least 6 months? _ Y _ N

How long is your daily practice? ½ hour _____ 1 hour _____ 1½ hours _____ 2 hours(+) _____

Which style(s) of yoga do you primarily practice?

Have you taken classes with a certified teacher for at least 6 months? _ Y _ N

Have you practiced Color Me Yoga®? _ Y _ N

If you answered yes: With a Color Me Yoga® Teacher? Teacher's name?

If you answered NO to any of the above questions: Please still fill out the application and wait to discuss the training with the director.

Are you currently teaching yoga? _ Yes _ No

How long have you been teaching?

What style of yoga do you teach? Number of classes per week

Please answer the following questions on a separate piece of paper.

1. What does yoga mean to you?
2. Why do you want to become certified as a Color Me Yoga® teacher?
3. Why are you interested in teaching this particular approach to yoga?

Health information (If you answer yes to any of the following questions please describe fully on a separate page.)

Are you under medical treatment for any physical or psychological condition? _ Yes _
No

Are you currently pregnant? _ Yes _ No

Have you ever been hospitalized for a psychiatric condition? _ Yes _ No

Do you have any physical challenges? _ Yes _ No

Have you had serious illness or major surgery within the last 5 years? _ Y _ N

Do you have a communicable disease? _ Yes _ No

Are you in recovery for any kind of addiction and if so, how long? _ Yes _ No
of years in recovery _____

Please list any prescription medications you are currently taking (indicate dosage and frequency of intake and reason for medication.

By signing below, I affirm that the information provided in this application is accurate and true and that failure to do so is grounds for revocation of certification or dismissal from the training. If I am unable to continue this training due to a medical emergency, I will speak with the director in order to suggest other options.

I have carefully read the Criteria for Certification and accept the requirements, conditions, and agreements expressed therein. I understand that my failure to meet the criteria will result in my not being certified. Please Initial here _____

I have carefully read the Responsibility Agreement and understand that Color Me Yoga® Enterprises LLC is not responsible for my physical and psychological safety during this training program. Please Initial here _____

I have carefully read the Color Me Yoga® Ethics Agreement and understand that any violation of this agreement during the training could result in my not being certified and that any future violation could result in the revocation of my certification. Please Initial here _____

I understand that the Criteria for Certification, Responsibility Agreement, and Ethics Agreement are legal contracts. I will keep them for my records. I will be asked to sign copies for Color Me Yoga® 's records on the first day of the program.

Signature _____

Date _____

Please keep a copy of this application for your files. Please submit originals to Color Me Yoga®.

Welcome to your journey into the Color Me Yoga® experience .

Cost \$2850. Materials Fee- additional \$150 paid at first session

Payment Options:

1. Pay In Full Save \$300. \$2550.
2. Initial Deposit of \$1,000. Subsequent Monthly Payments of \$185.

Credit Card Payments Pay Here.

Full Payment or \$1,000 deposit non-refundable if cancelled three weeks before training date. Credit applies to next training. If cancelled more than three weeks before training date, 75 % refund given.

Check or Money Order please make out to:

Color Me Yoga
PO Box 418
Wenham, MA 01984

Room and board is separate. Fee includes workshop and all course materials. 100% attendance is required. Please address any questions or concerns before the training dates.

Check here if you would like to be contacted to share a room.