



# KRI Level I Teacher Certification Program

## PERSONAL INFORMATION

Name \_\_\_\_\_

Today's Date (M/D/YYYY) \_\_\_\_\_

Address Line 1 \_\_\_\_\_

Address Line 2 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Work/Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_ Occupation \_\_\_\_\_

### Emergency Contact:

Name \_\_\_\_\_

Phone \_\_\_\_\_

Relationship \_\_\_\_\_



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## MEDICAL HISTORY

Please complete the medical history section below so that we can be sure to respond to any emergencies should they arise during your training. Please note that none of your responses would exclude you from being accepted into the program. All information is held in the strictest confidence.

1. How would you evaluate your current health?

- Excellent
- Good
- Fair
- Some challenges (Briefly describe)

2. Do any of the conditions below apply to you?

- Epilepsy
- Diabetes
- Pregnant, plan to become pregnant during the course of the training
- None of the above conditions apply to me.

3. Please list medications you are taking that were prescribed to you by a health care professional:

4. Please list any surgeries you have had and if there are any current conditions resulting from them.

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



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## 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 clear as possible. Do not fear answering no.

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. Do you have a home practice?     Yes     no
  6. Do you practice meditation?                      Yes    No
  7. Do you practice Kundalini Yoga?                Yes    No
  8. Do you have a daily sadhana?                    Yes    No
  9. Do you practice pranayama?                    Yes    No
  10. Is this your first training?                      Yes    No    *If no, please list prior trainings:*
  11. Who have been your primary teachers, both past and present?
  12. What area of yoga challenges you the most? (Please specify)
  13. Are you currently teaching yoga?            Yes    no
- If yes, for how many years have you been teaching? Where do you currently teach?
14. In your opinion, what qualities embody a good yoga teacher? Why?
  15. Why do you want to take this Kundalini Yoga Level I program?
  16. What are your expectations for this training? What do you hope to achieve at the completion of the program?



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## *PAYMENT INFORMATION*

A \$500.00 non-refundable deposit is due with your application and is deducted from the full tuition fee. Final payment is required no later than two weeks from the start of the program unless prior arrangements have been made. All deposits are non-refundable. Tuition minus the nonrefundable deposit is fully refundable up to 14 days prior to the beginning of the program. Once the program begins, tuition, including the nonrefundable deposit is nonrefundable, except in extreme cases of unprecedented or unforeseen circumstances and must be approved by the lead trainer. A wait list of students will be held up to the beginning of the course.

Payment options reflect the \$500.00 deposit:

1. **A one time full payment** of \$3,150.00 course fee plus lodging \$175.00 and meals \$475.00, due by February 15th, 2010.
2. **Two payments** of \$1,575.00 each plus lodging \$175.00 and meals \$475.00, due on Feb. 15th and March 15th, 2010.
3. **Three payments** of \$1,083.00 each plus lodging \$175.00 and \$475.00, due on Feb. 15th, March 15th and April 15th, 2010 .

The course fee includes the Teacher training Manuals. Any additional books recommended as options are not included. Attendance at outside workshops, White Tantric and classes are not included. The lodging and meals fees are a one time cost that will cover the entire three weeks.

Your teaching team has chosen to limit the class size to 12 trainees to create an intimate and nurturing environment where personal attention and a deep bond of friendship and support can be fostered. Applications will be accepted on a first come, first served basis with acceptance at the discretion of the teaching team.

Please contact Denise Lapides : [denise@divinelightyoga.com](mailto:denise@divinelightyoga.com) or 410-570-2878 with any questions you may have.

*I am paying by check. Please mail the check with your application to the address at the bottom of this application. \*Please include driver's license number, state and expiration date on the front of your check.*

*I am selecting Option 1 for a one time cost of \$3,300.00, plus the \$500.00 non refundable deposit, enclosed with my application.*

*I am selecting Option 2 for a two payment plan of \$1,650.00 each, plus the \$500.00 non refundable deposit, enclosed with my application.*

*I am selecting Option 3 for a three payment plan of \$1,133.00 each, plus the \$500.00 non refundable deposit, enclosed with my application.*

*I am paying through PayPal. Please email me an invoice, per the above referenced Option I have selected. I understand a 3% service fee for Paypal will be added to my cost. (3% fee for US residents, 4% international fee.)*



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I understand that if I fulfill all the requirements of the Kundalini Yoga Level I 200 Hour Teacher Training which meet the YA standards, as specified in this application, I will receive a certificate of completion from the Kundalini Research Institute and I am eligible for registration as a RYT 200, which can be submitted to the Yoga Alliance or a prospective employer as evidence that I have completed a 200-hour Teacher Training program meeting the YA requirements.

I understand that KRI reserves the right to ask me to leave the program if my behavior is inappropriate, unethical or violates the Kundalini Yoga KRI and/or Yoga Alliance ethical guidelines. Under such circumstances I understand I will not be refunded my tuition. I understand that any make-up hours, resulting from my absence, may incur an additional fee that I am responsible for in order to receive my certification.

I understand that if I cancel 14 days before the start of the training, I will receive a tuition refund minus the nonrefundable \$500 deposit. Once the program begins, tuition is non-refundable and non-transferable. I understand that all KRI Yoga Teacher Training materials are under copyright protection and cannot be re-produced 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

signature: \_\_\_\_\_

KRI Teacher Certification Program (Level 1 Certification)  
3 Weeks Intensive Course