



Be Luminous Yoga

Come home to your power.

Next Genreation Yoga: 300 HR Enrollment Form

Contact Information

Legal Name & Preferred Name	
Mailing Address	
City ST ZIP Code	
Cell Phone	
Work Phone	
E-Mail Address	

Next Generation Programs - Which Program Are You Attending

Program	List Date, Location & Trainer
<input type="checkbox"/> 2-7 Year Olds	
<input type="checkbox"/> 8-10 Year olds	
<input type="checkbox"/> Advanced Training	

Liability Waiver

I _____ (print full name) understand that yoga includes physical movement. Physical activity carries with it certain inherent risks that cannot be entirely eliminated. As is the case with any physical activity, the risk of injury, even serious or disabling, may be present in a yoga practice. I hereby assert that my participation in the Be Luminous Yoga Teacher Training program is voluntary, and that I knowingly assume all such risks.

I recognize it is my responsibility to practice modifications, and I take responsibility for speaking with the teacher if I come to class with injuries or am pregnant.

Yoga is not a substitute for medical attention, examination, diagnosis or treatment. Yoga is not recommended and is not safe under certain medical conditions. I affirm that I alone am responsible to decide whether to practice yoga. I hereby agree to irrevocably release and waive any claims that I have now or hereafter may have against Be Luminous Yoga (legal name Luminous gorilla Yoga LLC), Michel Eubank Spruance, other teachers who may be present, and other Teacher Training participants.

I have read and understood this assumption of risk. I acknowledge that I am signing freely and intend my signature to complete the assumption of the inherent risks of participating in the Yoga Teacher Training provided by Be Luminous Yoga.

Signature

Date

Program Refund Policy

Tuition: See current tuition as set by this program on it's event page at Be Luminous Yoga.com.

Refunds for the tuition of this program **follow the PROGRAM ORGANIZATION'S REFUND POLICY**. This program will **not likely follow the State of Washington Workforce Training Board** policy because it is not directly offered by Be Luminous Yoga.

This is a notice to you to read and understand the full refund policy as set forth by the parent organization in charge of this program and to be fully aware of this policy before you pay. Be Luminous Yoga cannot interfere with the Refund Policies of these organizations.

I have read and understand this statement regarding refunds for the above stated program I am enrolling in.

Signature

Date

Please email completed Enrollment Forms to tt@beluminousyoga.com.

See attached forms for Program Summary to be completed and submitted by you to Bly at the conclusion of the program.

Program Summary & Attendance Sign-Off

Program Title

Your Name

- 1) This program module accounted for _____ program hours.
- 2) Completion of this module should bring me to _____ total elective hours for toward the completion of by BLY 300 Hour Program.

Attendance Sign-Off

Instructions: Have this form signed and submit it electronically to tt@beluminousyoga.com along with your Summary Form within two weeks of program completion. You must have the facilitator (or their designated host) sign-off for each complete day of attendance, including all minimum required hours.

Program Title & Dates:	
Program Facilitator:	
Program Location:	
Session/Day	Facilitator Initials
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	

I, _____ (student), hereby confirm that the above information is complete and true, and the initials above have been provided directly by the facilitator him/herself, or his/her representative.

Signature

Date

Program Summary Form: Please submit this completed program form to tt@beluminouslyoga.com when within 2 weeks of course completion.

List 3-5 specific tools you gained from this training as a teacher:

How does your learning from this course apply to any and all teaching?

Please offer some feedback on the course:

- 1) The course met my expectations on a scale of 1 (low) to 5 (high)._____
- 2) The facilitator was prepared and effective (1-5):_____
- 3) Do you believe this course should remain as an Elective in the BLY 300 Program? Please Explain.