



Application

Miami Life Center's One Month Ashtanga Practitioner's Intensive is taught and directed by Tim Feldmann, Kino MacGregor & Friends. This course intends to cultivate real yoga in you, as defined by Shri Patanjali and according to the method set forward by Shri K. Pattabhi Jois and his Grandson R. Sharath Jois.

A completed application packet is required for any individual interested in enrolling in the Intensive program. For course and related questions please email monica@miamilifecenter.com. If you require immediate assistance please call Miami Life Center at (305) 534-8988. When accepted, you will need to submit a non-refundable \$850 deposit, that will secure your spot in the course. You will be notified about the exact schedule close to the course beginning and you will be notified and advised of any special assignments.

You will receive a certificate of completion upon completion of the course as long as all hours has been met. Complete credit and requirement completion is mandatory, including but not limited to, evaluations and payments due. Whereas the course meets the 200 hour standards for Yoga Alliance, please be aware that you will not be a Certified Ashtanga Yoga teacher, as only R. Sharath Jois can Authorize or Certify you to teach Ashtanga Yoga at the K. Pattabhi Jois Ashtanga Yoga Institute in Mysore after multiple trips to India. This course does not aim at making you an ashtanga yoga teacher, but a dedicated practitioner of the Ashtanga lineage.

In order to be considered for enrollment a full application package must be submitted and include the following items: a completed application form, a recommendation by a yoga teacher, a complete response to the questionnaire form, a photo of yourself, a completed Miami Life Center signed release & waiver form, and a signed agreement to payment terms form. The applicant is completely responsible for obtaining any passports or visas required for travel as well as meals and accommodations.

You may submit your completed application package by email to monica@miamilifecenter.com. You will receive automatic email confirmation of its receipt. Please include all documents in only one email, either as one document attachment or multiple attachments. Please make sure all writing and/or typing is clear and legible. Due to the numerous submissions and inquiries Miami Life Center receives, please be patient as we address each candidate, do not send multiple submissions or inquiries, we will respond to your submission within approximately 14 days.

Thank you for choosing Miami Life Center!
Om Shanti.

Application Form

First Name _____

Middle Name _____

Last Name _____

Address _____

City _____

State/Province _____

ZIP/Postal Code _____

Country _____

Phone _____

Email _____

Website _____

Birth date (MM/DD/YYYY) _____

Gender _____

Occupation _____

Emergency Contact Name: _____

Emergency Contact Phone: _____

Are you currently taking any medications? If so, what? _____

Dates Applying for _____

I am the individual given above. I confirm that all information provided herein is true, accurate and up to date. Further, I agree that to the extent that there are any changes to the information provided above that may affect my ability to attend this intensive or any classes, workshops, or trainings, I shall inform Miami Life Center as soon as possible hereof.

I understand and agree that any and all information I submit will be sent to the host studio, Miami Life Center and myself for the purposes of registration and application and graduation for the training in question. In addition, I confirm that I have read, understood and agreed to the payment and refund terms.

Applicant Signature _____

Printed name _____

Date _____

Application Questionnaire

How did you hear about this Miami Life Center Intensive?

Describe what your current yoga practice consists of and how many times a week?

Please describe why are you interested in this program?

Do you attend classes regularly and what type?

Are you considering other similar courses?

Do you have a home practice? What does it consist of?

What would you like to get out of this program?

Are you practicing any of the ashtanga asana sequences?

Are you currently interested in teaching yoga or are you considering this training for your own self-exploration?

Do you practice pranayama and/or meditation?

Applicant Signature _____ Printed name _____ Date _____

Application Questionnaire continued

Describe your experience with yoga. How long have you practiced, with whom have you studied and for how long, and what style of yoga do you usually practice?

Briefly describe any integrative therapies, body/mind, energetic, or spiritual practices with which you are or have been involved (including but not limited to meditation, nutrition, dance, theater, massage, therapy, etc).?

Describe if you are you currently teaching yoga and for how long you have been teaching? Please describe in what tradition or style you were trained and where you completed your training?

Describe any injuries, limitations, challenges, disabilities or illnesses of which we should be aware, physical, emotional or otherwise. How are you addressing these?

Please indicate if you are teaching another discipline?

Please describe your educational background (degrees, institutions, locations, and dates), from high school to college and beyond. Do you have any credentials in the allied health field(e.g., LMT, PT, RN, MSW, etc.)? Please describe any employment, life, volunteer or community service experience you think is relevant?

Applicant Signature_____ Printed name_____ Date_____

Application Release & Waiver

I, the undersigned, do hereby consent and agree to the following provisions as are set out in this waiver and release of liability and assumption of risk agreement (hereinafter the Agreement): I intend to and shall participate in a Miami Life Center class, workshop, retreat, intensive, continued education program and/or other yoga-related program or event(s) (hereinafter Intensive) offered by Miami Life Center, a Florida corporation, through Kino MacGregor, during which course I shall receive instruction concerning yoga exercises and I shall practice yoga exercises. I understand that yoga in general and the practice of Ashtanga yoga in particular involves strenuous physical activity, which may require balance, flexibility, muscle strength, aerobic fitness, mental concentration and other physical and mental abilities. I understand that yoga classes and the practice of yoga may be physically and mentally stressful and tiring, and that such classes and practice can result in new injuries or in re-injuring old injuries, including muscle soreness, strains, sprains, pulls, or tears, cuts or bruises, illnesses, or other unforeseeable risks which cannot be specified in advance. I have previously taken yoga classes or have otherwise conducted sufficient research into the practice of yoga to fully appreciate the type of activities taking place in yoga classes. In consideration of the foregoing, I hereby represent and warrant that I am in good physical condition and do not suffer from any disability, illness, impairment, disease, infirmity or condition which would limit or prevent my full participation in this Intensive. I further represent and warrant that: either I have had a physical examination and have been given my physician's permission to participate in this yoga program, or I have, after careful consideration of my physical and mental condition at present, decided to participate in this Intensive without the approval of my physician, and in either event, I do hereby voluntarily assume all responsibility for my participation and activities in this Intensive and for any risks, injuries or damages which I might incur as a participant in the Intensive, including without limitation, traveling to or

from and entering or leaving the location or premises at which the Intensive is held and making use of its facilities, participating in the Intensive itself, practicing or training for participation in the Intensive and any and all components of the curriculum offered under the Intensive, performing on my own the exercises, routines and yoga postures I have learned at the Intensive (either before, during or after the Intensive), and being instructed by paid or volunteer yoga instructors in at the Intensive. Notwithstanding the foregoing, if I do have any physical injuries or conditions, which might hamper my yoga practice, lead to pain or injuries when practicing yoga, or affect my participation in the Intensive in any other way, I shall promptly inform Miami Life Center in writing of those injuries or conditions at any point in time as such conditions may arise.

1.I agree to remain fully aware of my physical and mental conditions and limitations and I assume full responsibility for my physical and mental conditions and limitations while participating in this Intensive. I understand that I am at all times responsible for using sound judgment to ensure that I practice yoga at a pace and level of effort that feels safe and appropriate to me and my physical and mental conditions. I further agree to follow all rules and instructions of the persons teaching or assisting in this Intensive. I further agree that I shall not commit any actions that might impair my physical and/or mental condition and functioning, which might result in my being in a physically and/or mentally impaired state during any part of the Intensive, for example: using alcohol, illegal drugs or other harming substances.

2.In consideration of my admittance to participate in this Intensive, I, for myself, as well as for my heirs, guardians, executors, administrators, successors and assignees, hereby release (forever and irrevocably) Kino MacGregor, Miami Life Center, any teachers or assistants involved in any way in the offering or the provision of this Intensive, the sponsors, host and facility providers of this Intensive, the directors, officers, shareholders, employees, agents and attorneys of each of the foregoing, the licensees, successors and assigns of the foregoing, and any other parties acting in concert with any of the foregoing (with all the foregoing parties being hereinafter collectively referred to as the

Applicant Signature _____ Printed name _____ Date _____

continuation

Released Parties), from any duties, agreements, claims, counter-claims, debts, obligations, costs, expenses, loss of services, actions, risks, injuries, damages, accidents, liabilities, claims, demands, judgments, losses, costs and causes of action of any kind whatsoever arising or resulting from or relating in any way (in whole or in part) to my participation in this Intensive or any other yoga program with any of the Released Parties in the future, regardless of whether any such claims, injuries, etc. result from my own actions, inaction or negligence, the actions, inaction or negligence of other participants to the same or future Intensive, the alleged actions, inaction or negligence of any of the Released Parties or any combination of the foregoing. No representations of any kind have been made to me by any of the Released Parties to induce me to sign this release form; I am signing this form because I wish to attend a Intensive at Miami Life Center.

3. I hereby understand that the Studio from time to time may photograph or video record classes or events occurring at its studios and place such photographs and videos on its Website, Facebook, Twitter, other online platforms, and any printed materials. I hereby consent to the use of my image that may appear in any such photograph or video.

4. Without prejudice to any considerations herein, I agree not to sue or bring any legal claim, proceeding or action against any of the Released Parties (and I hereby knowingly, voluntarily and expressly waive any right to bring any such action) for any action or inaction (including any action or inaction constituting negligence) of the Released Parties resulting in personal injury, defamation, libel, invasion of privacy or any other similar harm as a result of my participation in this Intensive, irrespective of whether the cause, nature or existence of any such claim is known or unknown to me at this time. I understand that some of the potential injuries I might suffer in yoga classes are foreseeable, and that others are unforeseeable and that any such injury, which I do suffer, may be known or unknown to me for any given

length of time. To the extent permitted by law, I hereby

waiver and relinquish all rights and benefits I might have now or in the future under any federal or state statutes or common law provisions that either (i) do not extend to claims which I do not know or suspect to exist to be in my favor at the time of executing this release that, which if known, would or might have materially affected my agreement to the provisions of this Agreement or (ii) otherwise prevent or hamper the enforceability of releases or waivers of claims under this Agreement.

5. Should any part of this Agreement be found invalid or not enforceable by law, I understand and agree that the remaining provisions of this Agreement shall remain to be in force and continue to be enforceable to the greatest possible extent. Any modifications to this Agreement must be in writing agreed by both parties. This Agreement inures to the benefit of myself, Miami Life Center and the Released Parties involved in offering this Intensive and represents the entire agreement between concerning such Intensive and the subject matter hereof.

I hereby represent and warrant that either: I am at least eighteen (18) years of age and am competent in all ways to sign this Agreement and I realize that this is a legally enforceable and binding document. By signing below I certify that I have read and understood every part of this Agreement and I agree to comply with all of its terms and conditions; OR I am the parent / legal guardian of the applicant (the Applicant). I understand that I assume full responsibility for the Applicant while he or she is participating in the Intensive. By signing below

I certify that I have read and understood every part of this Agreement and I agree to the terms and conditions thereto on behalf of and for the Participant. I represent and warrant that I am competent in all ways to sign this Agreement and I realize that this is a legally enforceable and binding document.

Applicant Signature _____ Printed name _____ Date _____



Payment Terms

Program Tuition Payment:

Tuition: \$4250. A \$850 non-refundable deposit is required on acceptance into the program. All tuition fees must be paid in a timely manner in accordance with the deadlines specified.

Remaining amount minimum 30 days prior to the start date of the relevant Intensive, or such other deadline specified by the studio. Please note the exact deadline(s). No refunds, credits or transfers are available for cancellation

Prior to the start date of any Intensive program. Miami Life Center reserves the right to amend this policy at its sole discretion.

I am aware of and agree to the Payment Terms set forth by this Intensive and Miami Life Center.

Application Checklist

- Application form
- Teacher recommendation
- Questionnaire
- Release waiver
- Payment terms
- Headshot photograph

Applicant Signature_____ Printed name_____ Date_____

Accommodation Links

Miami Life Center is located on South Beach, in Miami Beach, Florida.

South Beach is an amazing beach locale with the ocean to the east and the bay to the west. In South Beach, recreation and entertainment are readily available and abundant. Healthy eats and juices are available at various establishments. Parks and the sandy beach are all in walking distance, and transportation, like bicycles and scooter rentals, and local bus fares and taxis are readily available and relatively affordable.

South Beach also has countless accommodation options to the visitor and traveler. While Miami Life Center is not able to assist you in arranging any travel or accommodation arrangements at any stage, we have provided a few public links that may be of interest. Please make all arrangements at your own discretion.

The address and zip code of Miami Life Center is as follows:

Miami Life Center

736 6th Street Miami Beach, 33139

When making your accommodation arrangements, you may choose to ask your desired location if they are currently offering specials or discounts to individuals partaking in our yoga workshops.

Helpful accommodation links:

<http://www.sobeyou.us>
<http://www.europeanguesthouse.com>
<http://www.tripadvisor.com>
<http://www.airbnb.com> <http://www.hostels.com>
<http://theanglersresort.com>
<http://www.marriott.com/hotels/travel/mi-amb-south-beach-marriott/>

Travel Agency Air World Travel

<http://www.awtmiami.com>
Email Owner Maria: travel@awtmiami.com
Phone: (305) 538-1555 or (305) 528-4938

<http://www.wholefoodsmarket.com/stores/southbeach>
<http://www.decobike.com>

Applicant Signature _____ Printed name _____ Date _____