

**Purusha Yoga Teacher Training
200 hour Registration Form 2008 San Francisco**

**May 17, 18
August, 2, 3**

**June 7, 8
August 9, 10**

**June 28, 29
August 23, 24**

**July 19, 20
Sept. 13, 14**

Daily Schedule: 8:00AM-7:00PM Includes breaks and meal times.

REGISTRATION FEE (MUST BE ENCLOSED)

I have enclosed registration fee of \$50.00 x _____

Please indicate which payment plan you are using:

1. PAY IN FULL \$2,400.00 paid in full x _____

(save \$200.00)

Check number enclosed: x _____

2. FIVE PAYMENTS \$500.00 enclosed x _____

The first payment of \$500.00 is enclosed

The following 4 payments will be for \$525.00 each.

Total \$ paid: 2,600.00

Total amount must be paid by July 1st, 2008

3. INDIVIDUALIZED PAYMENT PLAN:

SEE BELOW. There is a discount for students, and those in financial need. Call for more information.

Make your check payable to: Purusha Yoga, 1703 Brooks Street, APT. H San Francisco, CA. 94129

I agree to pay the total amount by August 1st, 2008. I understand that I may receive a full reimbursement for my payments minus \$50.00 if I withdraw before June 1st, 2008, and return all books and manuals.

Signature:

Name (printed):

Address:

Email: _____ Phone: _____

Please use another piece of paper to share with us your reasons for taking this course at this time. In addition, if you could include what you are wishing to achieve/learn by taking this course that would be most helpful. Finally, please give us a bit of history on your life's path and directions. We are looking forward to getting to know you better and sharing the journey

Optional Individualized Payment Plan:

Please feel free to make up your own individualized payment plan. Using the class dates as your guide, please fill in the amount you agree to pay at each class.

Date/amount

Deposit/ Date: _____
 April Payments: _____
 May Payments: _____
 June Payments: _____
 July Payments: _____
 August Payments: _____

Balance Forward: _____
 Balance Forward: _____
 Balance Forward: _____
 Balance Forward: _____
 Balance Forward: _____
 Balance Forward: _____

I agree to follow to the best of my ability the payment plan I have created above. If I encounter any difficulty with following this plan, I agree to discuss the matter and come up with an alternative plan. I agree to pay the total amount by July 8, 2008. I understand that I may receive a full reimbursement for my payments minus \$50.00 if I withdraw before March 1st, 2008 and return all books and manuals. This program fee includes the following: All classes, workbook, textbooks, certification and journal.