

Registration Form



2020 Iyengar Yoga Weekend Intensive Series with Chris Saudek January 10-12, March 6-8, and May 1-3

Name _____

Address, including Zip Code _____

Phone # _____

Email _____

Place a Check mark in the box next to your registration choice for the 3-weekend series.

1st price (nonmembers) / 2nd price (YCOM members).

To learn about YCOM membership, see <http://www.yogacoop.com>

SELECT ONE OPTION ONLY UNDER YOUR PRIMARY TRACK *
TRACK 1—those who are not certified in the Iyengar Yoga System

Option 1 Friday A.M. Asana + Teaching Methodology Class (TMC) -- \$220/\$200

Option 2 Option 1+ Friday Evening Asana -- \$280/\$260

Option 3 Option 2 + Sat.Sun Asana/Restorative/Pranayama -- \$670/\$620

Option 4 Option 3 + Observe Sat/Sun TMC -- \$860/\$800

TRACK 2—those who are certified Iyengar Yoga Instructors

Option 1 Sat/Sun Asana, TMC** and Restorative/Pranayama -- \$580/\$540

Option 2 Option 1 + Friday Evening Asana -- \$650/\$600

Option 3 Option 2 + Friday Track I- Asana & TMC Observe) - \$860/\$800

* Select the option you want even if you need to sign up for less than the full series. See instructions on page 2.

**Also includes philosophy discussion led by CIYT and Philosophy Professor Joy Laine

Current Certification Level: _____

Primary Teacher: _____

Interested in further certification? _____

If yes, in what year do you anticipate applying? _____

Registration Form

Using the box below, please include information about the following:

- **Request for Exception to Registration for Full Series:** Indicate the dates and reason you would need to miss and contact Faith Russell to inquire about fees.
- **Scholarship Fund:** If you would like to be considered for a scholarship, please include a brief description of your reason for need.
- **Special Circumstances:** Please include on the Registration Form any significant injuries or special circumstances that you feel Chris should know about.

Type to enter text

Steps to Complete Registration:

1. Fill out the Registration Form and save it to your computer with your name in the title
2. Send the completed Registration Form as an attachment to Faith Russell faitherussell@gmail.com
3. Mail your deposit. Make your check payable to the Yoga Cooperative of Madison with your \$100 deposit (or, full payment if you prefer) and mail it to:
Faith Russell
606 Clemons Avenue
Madison, WI 53704
PLEASE NOTE: YOUR REGISTRATION WILL NOT BE CONSIDERED COMPLETE UNTIL YOUR DEPOSIT IS RECEIVED.
4. Full payment is due by December 15. An installment option is available (see “Additional Information” on the Program Information Page) – but all checks must be received by December 15.

Registration will be confirmed upon receipt. If you do not receive confirmation, please e-mail Faith Russell faitherussell@gmail.com or call Faith at 608-287-6619 to inquire.