

AMAR DAS ACADEMY
International Kundalini Yoga
www.amardas.at



KRI Kundalini Yoga
Teacher Trainings Level 2

Registration and Release Form

Kundalini Yoga International Teacher Training Level 2

Please sign both registration and release (2 signatures) and send back to:
trainings@amardas.at

REGISTRATION FORM

Family name	First name
Spiritual name	
Street	Zip code, City
Country	Telephone
E-mail	Birthdate
<i>I agree to the terms, conditions, costs, payment and cancellation modalities, and certification requirements as described below.</i>	
Location, Date	Signature

Modules, Dates and Locations:

Authentic Relationships > online and partly hybrid

1.10.-3.10.2021 - 29.10.-31.10.2021

Terms and Conditions:

Participation to all modules, to the study groups (max. 3 meetings after each module – participation through Skype possible), as well as completion of all homework after each module are conditions for certification by KRI. All information regarding a student is maintained confidentially as required or permitted by law. Delays in payment will entail a judicial penalty as delayed payment charges. Court of jurisdiction is the competent court in Vienna.

Fees: -please underline your choice-

Per module:

-> € 650,- Full price

-> € 550,- Euro Early Bird (registration before 9th of September 2021)

Couple discount: 25 % deduction for one of the partners applied to one of the above fees.

To pay in installments is possible after making an agreement with the course administration.

Payment Conditions:

Your registration is secured only after payment of a 150,- Euro deposit (see bank account below). This advance is not refundable. Payment of the fees is due and payable maximum 14 days before the start of the training, in order to guarantee your place.

Cancellation Policy:

In case of cancellation till 30 days before the start of the training you will be reimbursed 100% of the total costs of the training (minus the advance).

In case of cancellation till 15 days before the start of the training you will be reimbursed 50% of the total costs of the training (minus the advance).

In case of cancellation within 14 days before the start of the training the full cost of the training will be retained by the organizer.

The training fees shall be paid in full also in case you decide not to complete the training.

In case of outstanding payments, certificates and letters of attendance cannot be issued.

Bank account:

Beneficiary Name: Christian Navarro Garcia

Beneficiary Address: Fruchtgasse 3, 1020 Vienna (Austria)

Beneficiary Account number: IBAN: AT 32 3290 6000 0001 4183

BIC: RLNWATWWWY

Purpose of use: AR LV2

RELEASE FORM

I am aware that the Kundalini Yoga Teacher Training Program is here to serve me by sharing knowledge of Kundalini Yoga and health. I recognize that yoga requires physical exertion that may be strenuous and may cause physical injury, and I am fully aware of the risks and hazards involved. I understand that it is my responsibility to consult with a physician prior to and regarding my participation in the Program.

I have informed the training team of physical and health conditions that I might have, even if I consider them to be a minor problem, and that could possibly limit my full participation in the training.

KRI and the Teacher Training team reserve the right to grant KRI Level Two certification upon completion of all five modules based solely on their discretion and evaluation of each student's readiness to be a Kundalini Yoga Teacher.

In consideration of being permitted to participate in the Program, I agree to assume full responsibility for any risks, injuries or damages, known or unknown, which I might incur as a result of participating in the Program. The training team is liable within the framework of the existing law for all damages which fall within its sphere of responsibility.

I understand that I must complete all the requirements no later than three months from the end of the module in order to certify.

The Undersigned agrees that they have read, understand, and agree to all the Release information stated herein and that all the Registration information provided is correct to the best of their knowledge.

Signature (Legal Name): _____

Date: _____