

## 2017 Musculoskeletal Ailments Training Application

Please submit pages 1 - 2 with your payment. Keep page 3 for your records.

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_  
e-mail address \_\_\_\_\_ Age \_\_\_\_\_

**Prerequisites:** Completion of an Anusara Immersion or other complimentary training in body work and comprehensive understanding of Anusara Yoga alignment principles.

1. Do you have a working knowledge of the Universal Principle of Alignment™ of Anusara Yoga? If not, where are you unclear?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Do you have other training in bodywork? If so, what modalities and how long have you been in private practice?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Please list any health or time limitations that may affect your participation in the course.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Have you taught yoga before? If so, for how long? What style? Where? Average class size?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Please explain your reasons for wanting to participate in this course. What are you most excited about? In what areas do you expect the most growth/challenge?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any current injuries, health conditions or chronic pain that may effect your comfort/participation during yoga classes? If yes, Please explain.

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Please check any conditions that apply:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Diabetes                | <input type="checkbox"/> Hypoglycemia          | <input type="checkbox"/> Chronic Headaches    |
| <input type="checkbox"/> Asthma                  | <input type="checkbox"/> Ulcers                | <input type="checkbox"/> Low Blood Pressure   |
| <input type="checkbox"/> Herniated/Bulging Disc  | <input type="checkbox"/> Epilepsy              | <input type="checkbox"/> Rheumatoid Arthritis |
| <input type="checkbox"/> Hernia                  | <input type="checkbox"/> Sciatica              | <input type="checkbox"/> Scoliosis            |
| <input type="checkbox"/> Hypertension            | <input type="checkbox"/> High Blood Pressure   | <input type="checkbox"/> Digestive Disorders  |
| <input type="checkbox"/> Heart Disease           | <input type="checkbox"/> Osteoarthritis        | <input type="checkbox"/> Immune Disorder      |
| <input type="checkbox"/> Spondylolisthesis/lysis | <input type="checkbox"/> Allergies (food/meds) | <input type="checkbox"/> Mental Illness       |

Any other health conditions or surgeries you have had that may affect your retreat?

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Please list any food allergies or special diet considerations? Non-dairy? Gluten-free? Catered meal is vegetarian organic with non-dairy option.

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Organic lunches are available for an additional fee of \$8 per meal.

Would you like to purchase lunches too? Yes\_\_\_ No\_\_\_ If yes, how many? \_\_\_\_\_

**Accommodations:**

**Camping or Bunk Beds:**

There are numerous bunk beds so nobody has to share. You'll have your pick!

**Please bring your own bedding and linens:** sheets, blankets/sleeping bag, pillow, towels

Please list 2 emergency contact people:

First contact: Name \_\_\_\_\_

Phone

Numbers: \_\_\_\_\_ Relationship: \_\_\_\_\_

Second contact: Name \_\_\_\_\_

Phone

Numbers: \_\_\_\_\_ Relationship: \_\_\_\_\_

## Agreements for the 2017 Musculoskeletal Ailments Training

I, \_\_\_\_\_, understand that I have a financial responsibility for the  
(please print your name)

entire cost of this 2017 Musculoskeletal Ailments Training, regardless of my attendance. The entire amount of the training is due by no later than May 20, 2017. I understand that if I cancel before April 1, I will receive a full refund or credit (my choice) minus a \$25 administration fee. If I cancel between April 1 - 25, I will receive a full refund or credit minus a \$100 cancellation fee. If I cancel after April 25, there is no refund offered. Please notify us in writing if you need to cancel your participation in this training. If for any reason, the teachers cancel the training, you will receive a full refund.

If I decide to cancel my attendance in this training after April 25, 2017 due to severe illness or emergency, I will receive a credit to be used for classes or other trainings or workshops with Robyn or Patrick, minus a \$100 cancellation fee. In the event of my absence from sessions in this Training, I understand that I can make arrangements to make up missed sessions in future Musculoskeletal Ailments Training courses with Robyn Smith at no cost. These make-ups will be at the rate of one hour for every hour of same topic class missed in 2017. If make-ups are not possible, I have the option to schedule private paid sessions with Robyn Smith or Patrick Harestad to cover missed material at the rate of \$50 per hour. Full participation is required (or make-ups) to receive a certificate of completion.

Enclosed is my full payment (circle one) of \$ \_\_\_\_\_ check/cash/money order.  
(Please make check/M.O. payable to Inner Freedom Yoga). I have read and agree to the above arrangements for this course. If you would like to pay in cash, please make arrangements to meet with Robyn or Patrick in person.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**Keep this page for your own records:**

**ARRIVAL/DEPARTURE:** You can arrive as early as 2 pm Friday to get settled. One of us will be there to greet you and direct you to rooms, etc. The training begins at 3 p.m. Friday, May 26 and ends at 4 p.m. on Monday, May 29.

**Meals:** there are three catered vegetarian dinners provided by a local caterer. All other meals you are on your own, or you can opt to purchase lunches for an additional \$8 per meal. There is plenty of refrigerator and freezer space and room to prepare and cook food in the industrial sized kitchen.

**Directions:** The retreat takes place at Camp Mattole, 36841 Mattole Road in Petrolia, CA. which is about 2 hours south of Arcata.

**FROM THE NORTH HWY 101**

14 miles south of Eureka, take the Ferndale Exit and follow the signs to Ferndale. At the far end of town turn right on Ocean Ave then left on Mattole Road. (From here it will be roughly an hour on a rural country road). The camp is about 7 miles past Petrolia & around the corner from A.W. Way County Park. Entrance is on the left, just before the single lane bridge.

**FROM THE SOUTH HWY 101**

About 20 miles north of Garberville, take the Honeydew Exit and follow the signs to Honeydew. (From here it will be roughly an hour on a rural country road). At Honeydew turn right towards Petrolia and drive about another 7 miles. Cross a single lane bridge and the camp entrance will be on the right. If you come to A.W. Way Park you've gone too far.

**Lodging:** We have access to most of the buildings on the property and each has bathroom facilities. Each also has several bunk beds. There are plenty of beds so that nobody needs to share a bunk. **Please bring your own bedding and linens:** sheets, blankets/sleeping bag, pillow, towels as none are provided.

**Camping:** There is plenty of space to camp if you prefer to do that.

**SCHEDULE:** Please note that we will strive to always start on time and yet we may adjust the times once we see about the weather and the flow of the group.

**Approximate SCHEDULE:**

**Friday:**

2 p.m. arrival and set up  
3 - 5 p.m. Training class  
5:30 - 7 p.m. Aligning the legs and hips

7 - 8:30 Dinner, clean up  
8:30 - 10 p.m. Opening Circle

**Saturday:**

8 - 9 a.m. Meditation/Pranayama  
10 am - 12 p.m. Feet, Ankles, Knees, Thighs  
12 p.m. Lunch  
2 - 5 p.m.: Training Class  
5:30 - 7 p.m. Lower Back, Hips, Sacrum  
7 - 8:30 p.m. Dinner, clean up  
8:30 - 9:30 p.m. evening fun

**Sunday:**

8 - 9 a.m. Meditation/Pranayama  
10 am - 12 p.m. Upper Back, Neck, Shoulders  
12 p.m. Lunch  
2 - 5 p.m.: Training Class  
5:30 - 7 p.m. Elbows, Wrists, Hands  
7 - 8:30 p.m. Dinner, clean up  
8:30 - 10 p.m. Evening fun

**Monday:**

8 - 9 a.m. Meditation/Pranayama  
10 - 11:30 a.m. Chest, Jaw & Neck  
11:30 - 12:30 p.m. Lunch  
12:30 - 1:15 p.m. Retreat Closing Circle  
2 - 4 p.m. Training Class

**YOGA SESSIONS:** These are therapeutic yoga classes, meant to unwind tension using healthy alignment principles in regular or modified postures. We will take what you practice in the yoga sessions into the training periods for discussion, postural assessments and hands-on adjustments of these areas.

**CARPOOLING:** Carpooling is highly recommended! If you'd like to offer a ride or get a ride from Arcata or elsewhere, please email us. When the email list has formed, I will share your emails so you can communicate with each other about this.

**WHAT TO BRING:** Please bring towels for swimming and shower, toiletries, yoga mat, blocks, strap, yoga blanket, cushion for meditation, and any other props you like. We will bring some yoga blocks, straps and blankets as well. If you do not have your own block and strap, please let us know so we will bring enough. Make sure you at least have a block or meditation cushion/yoga blanket for our meditation periods and seated poses. we do not have enough of these. Also bring a raincoat or something waterproof to put your cushion on in case we decide to use the grass for meditation.

Also, bring:  
Natural Bug Repellent  
Sun Screen and Hat

Clothes for hot days and cool mornings and nights (layering may be very helpful in the yoga sessions)

Flashlight

Musical Instruments to share your talents...poems, songs, stories, etc. for Saturday night

Food for all meals but dinners...(you may like a light fruit snack before we start in the morning)?

Sturdy sandals/shoes for walking

Camera, etc.

Small chair if you like one for the beach and any floaty toys to play with in the river!