



**FireShaper**  
hot yoga redefined...

## Welcome to Fire Shaper - USA

### Teacher Training and Life Optimization Program

200 Hour IGNITE SERIES training certification

Thank you for your interest in training with us. This application and agreement are essential to your registration with our training program. We will clearly state certain requirements in the follow agreement. Once you have completed this application and have signed it, send the entire document directly to us either via email or fax (201.477.0632). Please have either your full payment or deposit enclosed or purchased online via the link that may have been provided to you. Our training program is registered with "Yoga Alliance" and is certified as a 200hr course.

This is a basic level 1 - 200hr training program designed to train you in the unique systems of Fire Shaper practice and to enable you the skills and certification necessary to teach our systems of Fire Shaper with our studios and abroad. Unique to our training we involve the process of creating your very own wellness lifestyle that will serve to transform your unified yoga practice. We will ask you to participate in the process of cleansing, detoxification, awareness and rebuilding. We ask you to enter this training with an open mind and an eagerness to not only learn but, to also engage into an awareness of your human potential. Through this process your mission may become clear and you may better learn how to affect people through this Fire Shaper practice.

You will be graded on a simple "pass or fail" scale. Our Fire Shaper team will personally assess your accomplishments in the teaching of this unique system. We will ask that your conduct and participation in this program be one of a loving and understanding nature. We ask that you allow your heart to lead you through this practice and appreciate the individuality of each participant. Open in our heart, we will truly enjoy this journey together.

There will be mandatory dates and times that require your participation. These dates and times are essential to your experience and certification. Please adhere to the mandatory requirements as all students of this training will be held to the same expectations and principles. During this training, you will be asked to fulfill certain requirements that do not have mandatory dates or times assigned to them. Our team requires that your participation be tracked via your mentor, your buddy, and/or receipts of payment when necessary.

During training, each individual will be evaluated for progress. If you are having difficulty throughout this process our team will work to assign you additional hours to assist you as needed to which there may be assessed additional fees to cover the additional hours required. We truly wish for you to immerse yourself in this process of discovering your own individual human potential and for you to become the person of your dreams.

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\*Pure Prana LLC – 33 Sicomac Road – North Haledon – NJ – 07508 – 973.949.5500

\*Hot Yoga NJ LLC – 42 Park Ave – Rutherford – NJ – 07508 – 201.842.9898

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# Fire Shaper Teacher Training Application

## CONFIDENTIAL APPLICATION FOR FIRE SHAPER TEACHER TRAINING

### APPLICANT

NAME \_\_\_\_\_ DOB \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

MOBILE: \_\_\_\_\_ HOME: \_\_\_\_\_

WORK: \_\_\_\_\_ OTHER: \_\_\_\_\_

EMAIL: \_\_\_\_\_

### EMERGENCY CONTACT INFORMATION

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_ MOBILE: \_\_\_\_\_

HOME: \_\_\_\_\_ OTHER: \_\_\_\_\_

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## **Please answer all of the following questions:**

- Have you practiced any form of Hot Yoga before?
  - If so, where and for how long?
  
- Have you practiced any form of yoga, pilates, dance, Martial Arts or any other method of personal or artistic expression prior to this training?
  - If so, what, where and for how long?
  
- Are you certified in any other form of yoga?
  - If so, what are your certifications and from whom did you obtain them?
  
- Do you hold any other form of teaching or completion certifications?
  - If so, please list: (Please supply a copy of your certifications)
  
- What, if any, is your favorite style of yoga to practice? And why?

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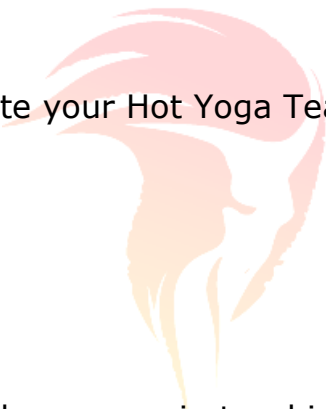
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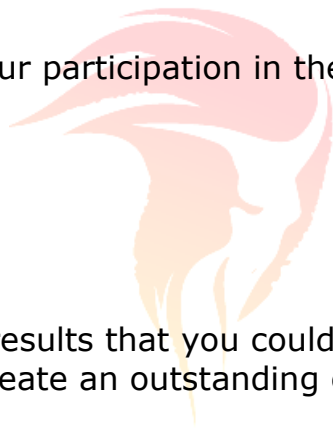
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- When you are practicing yoga, what is most important to you?
  
  
  
  
  
  
  
  
  
  
- Why do you want to teach Hot Yoga?
  
  
  
  
  
  
  
  
  
  
- Describe what you anticipate your Hot Yoga Teacher Training to be like?
  
  
  
  
  
  
  
  
  
  
- What do you think the challenges are in teaching the style or styles you know in a Hot room?
  
  
  
  
  
  
  
  
  
  
- What benefits do you believe you or your students get from practicing a hot Yoga practice?



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- Why have you chosen Fire Shaper for your teacher training experience?
- What is most important to you in participating in the Fire Shaper Teacher Training 200 hour Course?
- How will you know that your participation in the 200 hr Course was successful?
- Please list 3 outcomes or results that you could experience in our program which, would be sure to create an outstanding experience for you:



### OUTCOMES

- 1.
- 2.
- 3.

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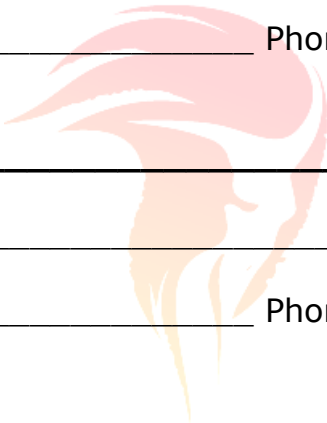
## REFERENCES

Please list three (3) references you have interacted with in a personal or professional capacity who are NOT related to you:

**Name** \_\_\_\_\_  
Address \_\_\_\_\_  
Company \_\_\_\_\_ Phone# \_\_\_\_\_

**Name** \_\_\_\_\_  
Address \_\_\_\_\_  
Company \_\_\_\_\_ Phone# \_\_\_\_\_

**Name** \_\_\_\_\_  
Address \_\_\_\_\_  
Company \_\_\_\_\_ Phone# \_\_\_\_\_



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## **APPLICANT'S ACKNOWLEDGEMENT & ETHICAL PARTICIPATION**

As your teachers in this Fire Shaper Teacher Training and the teacher training team of Fire Shaper hold our student teacher relationship in the utmost respect. We wish you a safe, happy, healthy experience and look forward to our relationship with you in the future. As a Yoga Instructor we feel that each participant also have the utmost respect for their fellow trainees and future students.

As you all can understand, there are a few ethical things that need to be disclosed. We think that these principles are universal among everyone participating and will help us to be ourselves.

- There is **zero tolerance** for any sexual misconduct or harassment.
- Each trainee is entitled to their privacy and should hold the privacy of others to the most important standards
- Financial positions should be fully disclosed prior to the start of the training and are to be kept private
- There is no discrimination of any kind tolerated
- Please avoid the use of drugs and alcohol during this training. The abuse of such may place yourself in a position that you are asked to leave the training with no refund.
- Please be well groomed during this training
- All agreements are confidential in nature
- Your information will not be shared
- Your certification is valid for a two year period in which time you would re-connect with Fire Shaper to attend a 3 hour re-certification or more advanced Training course with Fire Shaper
- Lastly, it is important to acknowledge that we are here for a greater purpose... to serve others. We exist as one and working under this premise we will have the greatest relationships one could ever ask for. We are not the quality or quantity of our knowledge...we believe that we are the quality of our relationships and we respect and acknowledge this universal understanding.

In reading the agreement, these terms will become your binding agreement with Fire Shaper. The terms will be very clear and we are happy to answer any questions you may have.

Through your participation of this program you agree to be committed to the programs course and the teaching of our unique style. You choose to act with integrity and purposefulness. If we deem that you are not acting as such you will be removed from the training program and a refund will not be provided.

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It is unlikely that you may fail this program as we will do what we can to assist you in any extra ways and through extra hours if needed to assure your success. If for some reason you do fail, you will have no right to refer to yourself as certified and will not have a certification to teach our Fire Shaper system. If you do fail and choose to do the training program over you will be entitled to a 50% discount on the cost of the next training with us.

Upon completion of this program and presentation with a certificate of completion/approval, you may teach our Fire Shaper style and system provided that you do so in a professional style and manner in accordance with the terms of this agreement.

**You are free to teach for any studio you like and/or open your own private yoga studio. However, we require that you acknowledge the below agreements and hold yourself to these honored and well respected professional standards.**

1. You may not use the marks of or terms related to Fire Shaper, Fire Shaper classes, business, or similar without the express written approval from Fire Shaper. If you choose to teach for other yoga studios, you may advertise that you are a "Fire Shaper" instructor but, you may not advertise that you are teaching a Fire Shaper class or branded likeness for any other business entity other than a Fire Shaper branded facility.
2. Regarding any businesses that you may be an Independent Contractor for or Employee of or Vendor of – Those businesses may not under any circumstances use the Fire Shaper name, class names or marks to advertise you or your classes/workshops. However, you, in your own independent Social network or outreach are welcomed to use the Fire Shaper signature (*awarded on a case by case basis only*) that may be provided to you and/or advertise yourself as a Fire Shaper instructor provided that you remain in good standing with Fire Shaper and are up-to-date in your re-certifications with Fire Shaper.
3. You may not open a yoga studio or facility using our name, company name, company identity, company/corporate designations or "d/b/a" of Fire Shaper or future company/corporate entities operated or owned jointly or severally, in whole or in part by Dr. John Surie or Natalie Surie unless, agreed to in writing by Dr. John Surie and Natalie Surie and the agreement may be subject conditions, limitations and licensing fees that Dr. John Surie and Natalie Surie may, in our respective sole and absolute discretion, required at that time.
4. You authorize Fire Shaper to use your picture or other likeness in any advertisement, including, but not limited to marketing ads, journals, magazines, websites and any other similar promotional materials.

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5. The certification provided to you does not make you and agent, representative, owner or partner of Fire Shaper.
6. By signing this agreement you acknowledge that you are in good health and that you have been examined by a licensed physician with the known intention of participating in the training. Upon examination you have been determined to be in good health and able to fully perform all physical requirements of the instruction and program in our heated rooms.
7. You agree to waive and release Dr. John Surie, Natalie Surie, their agents, instructors, employees and the members of the Fire Shaper Teacher Training team from all liability for any and all loss or damage on account of practicing yoga or other activities, programs or education offered by Dr. John Surie, Natalie Surie and the program. You agree to hold Dr. John Surie, Natalie Surie, their agents, instructors, employees and members harmless for any fees or costs or expenses that may be incurred out of necessity to defend any lawsuit instituted by virtue or injury or death or damage you may suffer.
8. Your breach of any of these provisions may result in continuing and irreparable harm to Dr. John Surie & Natalie Surie, jointly or severally in whole or in part, for which there may be no adequate remedy at law. Accordingly, Dr. John Surie and/or Natalie Surie, jointly or severally shall be entitled to enforce these provisions by means of injunction, temporary restraining order or other remedies in equity.
9. Should Dr. John Surie and/or Natalie Surie jointly or severally be required to commence a legal proceeding to enforce these provisions, you will be responsible for all costs and expenses that Dr. John Surie or Natalie Surie jointly or severally incurs.
10. If any part of this agreement shall be subsequently determined by a Court of Law to be unlawful, the balance of this agreement will still be given full force and effect. No waiver by any of the parties of any breach of this agreement or the terms thereof shall be deemed a waiver of any subsequent breach or of the entire agreement.
11. Notwithstanding anything to the contrary herein, the parties further specifically agree that they will not at any time, in any fashion, form or manner, either directly or indirectly, divulge, disclose, or communicate to any person, firm, or corporation, in any manner whatsoever, any information of any kind, nature or description, concerning any matters affecting or relating to the business of Fire Shaper. The parties hereto agree and stipulate that as between them, the effective and successful conduct of the "yoga studio", and its goodwill, and that any breach of the terms of this paragraph is a material breach thereof.

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12. No modifications of this agreement shall be binding unless written and signed by all parties hereto. Any notice required or desired to be given under this Agreement shall be deemed given if sent in writing by certified or registered mail to the teacher trainee participant or Dr. John Surie and Natalie Surie and at the addresses set forth in this Agreement or such other address as may be designated in writing by either party.
13. The parties agree that this agreement shall be governed by the Laws of the State of New Jersey County of Bergen.
14. You also agree that these provisions are intended to be as broad and inclusive as is permitted by the laws of the State of New Jersey County of Bergen.
15. The parties acknowledge the following facts:
  - (a) That this agreement is binding upon all the parties.
  - (b) Each has had the opportunity to consult with legal counsel, prior to the signing of this agreement, and that they are satisfied with the legal services rendered.
  - (c) That each party has thoroughly reviewed each provision of the agreement with legal counsel and that they have a thorough understanding of each provision and their rights and obligations thereunder.
  - (d) That this agreement is being entered into freely and voluntarily.
16. These provisions are independent of any damages that Dr. John Surie or Natalie Surie jointly or severally may be entitled to. By signing this application and agreement you are agreeing to these terms and agree that these terms are reasonable and correct.

I acknowledge that any false or misleading statements or information given in my interview or teacher training agreement or application may result in discharge in the event that I am accepted for this program. I also understand that I am required to abide by all policies and honor all regulations and requirements of this company / Yoga Studio(s).

I hereby authorize permission for this company / Yoga Studio(s) to contact any persons, companies, schools or anyone else referred to in this application and I hereby authorize these persons, companies or schools to provide all information concerning me to this company / Yoga Studio(s). I further release all such parties

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and this company / Yoga Studio(s) from any and all liability for damages whatsoever that may result from such contact or information.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name Printed: \_\_\_\_\_

Witness: \_\_\_\_\_ Date: \_\_\_\_\_

Name Printed: \_\_\_\_\_



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