

2016 Empowerment Training Agreements Contract

I _____, of: address _____

Agree to uphold and abide by to the below-listed personal, financial and program agreements and hereby request application to the 2016 Empowerment Training:

- **I shall agree to the total financial commitment whether or not I attend all the weekends/retreats** Tuition: __\$3495 OR __\$3145 (early registration discount if paid in full by February 1, 2016)
- A minimum of 3 professional breathwork sessions or equivalent to be received *prior* to the start of the Training (or with approval of the Director).
- Willingness to partner with a Training Buddy during the Training.
- Professional breathwork sessions or equivalent (by a certified breathwork practitioner) *during the course of the training* (Min. of 6).
- Breathwork sessions with your Buddy (min. 45 minutes each) – to be completed before the last weekend of the Training (Minimum of 3).
- Breathwork self-breath sessions (min. 45 minutes), one per month, during the training period (Minimum of 8).
- Completion of Harvest (evaluation) Forms (8) for each training event as required submitted electronically *within one week after training event*.
- Maintenance of a personal journal (diary) during the training.
- Completion of a Completion Questionnaire *during the last weekend*.
- Agreement to participate in all activities according to the instructions of the facilitators, not to exceed personal safety and self-responsibility.
- Agreement to refrain from personal computer/phone use during the course of each training day unless absolutely necessary (to discuss the 1st weekend).
- Willingness to participate in electronic and/or telephone contacts i.e. email, teleconferences, etc. during the course of the training as needed.
- Maintenance of a Personal Support System during the training (specific instructions for this will be discussed during the first weekend).
- Phone support from Jeremy or staff (beyond a 5-10 minute check in) will be billed at the standard hourly session rate.
- Agreement that if you miss a weekend, you are responsible for catching up on missed material with your buddy or an assistant trainer.
- Agreement to refrain from facilitating breathwork on paying or non-paying clients for the duration of the course unless: 1) You already have an established professional practice and breathwork is a part of what you already offer, 2) Facilitation is a part of the above-listed program requirements (e.g. with buddies), 3) Permission to do so granted from the Director of the POBI.

Signed _____ Date signed _____

Credit Card/Payment Authorization Form

Name: _____ **Date:** _____

Type of Payment:

- ☐ **Credit/Debit Cards:** I hereby authorize Power of Breath Institute to charge to the following credit/debit card account in the amount shown below for application to the 2016 Empowerment Training. Payment(s) will be charged as indicated by the signature and date(s) below:

CREDIT/DEBIT CARD INFORMATION:

Card Type: Visa MasterCard Credit: Debit:

Name as it appears on the credit card:

Card Number:

Amount:

Expiration Date: _____

Billing Address: _____

Email Address: _____

- ☐ **Check payments:** I, _____, hereby agree to make payments by check for the 2016 ET according to the schedule indicated below:

Schedule of Payment:

- ☐ **Non-refundable Deposit:** **\$395**
- And:**
- Balance due payment of \$3100 to be made by the first weekend**
- Or:**
- ☐ **Early Registration Discount – payment of \$3145**
(tuition must be paid in full by February 1, 2016.)

Applicant's Signature: _____ Date: _____

**Checks to be made payable to: POBI
Jeremy Youst
45 Stones Mill Rd
Spofford, NH 03462**