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# **APPLICATION TO JOIN SYTA OR RENEW MEMBERSHIP**

New Application (Once off Joining Fee \$10)	Renewal (Membership No
\$99 Level 1- Full Teacher/supporter	\$55 Level 2 – Trainee
\$25 Level 3 - Associate/Trainee/Friendship	
PART A – PERSONAL DETAILS (to be clearly filled in by all three l	evels of new applications or renewals for membership)
Full Name Date of B	irth
Postal Address	
Home Phone ( ) Business Phone ( )	Mobile
Email	
My particular area of interest in Yoga	
(Level 1 & 2 only – Level 3 go straight to part F) The following two (2) written character references are attached separatel (Give names, professional standing and telephone number):	y:
i	
ii	
Please give details of any criminal record	
1. All relevant documentation must accompany your Application, which full. (Write N/A if not applicable). An applicant can only apply for ONE all relative information as requested has been sent correctly with this app 2. Photocopies of all documents (courses etc.) which you are claiming for signed statutory declaration where necessary. Letters supporting cpd hou	level of membership on any one application at a time. If plication, process can take upwards to 60 days. or qualifications must accompany this application, with a

3. Approval of new membership and/or upgrading etc. shall be at the discretion of the Board of Management.

4. Applicants must not describe themselves under the membership level being sought, until such time as official notification is received from SYTA.

5. New applicants are requested to supply two (2) current character references from persons who have known you for more than two years, other than family. Persons of good professional standing are preferred.

6. With this application, new applicants should supply a copy of their birth certificate/passport/drivers licence or other identification.

7. Application fees (where applicable) must accompany this application (by way of eft/visa/mastercard). Where the association has rejected an application, fees paid will be returned in full, less a small administrative fee.

## PART B - QUALIFICATIONS (Levels 1 & 2)

On separate paper please provide details and supply photocopies of all your relevant documentation.

If you have no documented evidence could you please provide a letter certified by a Justice of Peace, that the training, and/or work history you have detailed is true and correct.

When listing your qualifications, indicate the duration of course or hours of study. Support material to be provided.

1. List General Qualifications: Include training institute name & address, date graduated, subjects studied, duration of course/total hours of training

2. List Yoga Qualification/s: Include training institute name & address, date graduated, subjects studied, duration of course/total hours of training

3. List Yoga Workshops/Weekend Seminars Etc. attended: Include qualification, training institute name & address, dates of events, subjects studied, duration of course/total hours of training

4. For Level 2 trainee members, please indicate details of training in yoga. Include qualification, training institute name & address, dates of events, subjects studied, duration of course/total hours of training

5. First Aid: Please attach copy of current First Aid Certificate, showing Number, Organisation, and Date.

#### PART C - DETAILS OF PRACTICE (Level 1 only)

1. Work details: Add supporting material as appropriate - statutory declarations, letters or references.

i. Attach all details of relevant work (state whether Part Time or Full Time).

ii. Please detail names and addresses of work places / employers.

iii. If self-employed, please detail services provided by yourself.

2. Other Modalities practiced.....

### PART D - AFFILIATIONS

1. Membership with other associations/ organisations: Include Qualifications, Association/Organisation name, date joined

### PART E - AGREEMENT (levels 1 & 2)

As a practising member of the Shanti Yoga Teachers Association, I shall:

### i. Abide by Code of Ethics of SYTA

1. I shall instruct in a competent, caring, responsible manner.

I shall practice with benefiance (the principle of healing) and non-maleficence (refrain from causing harm, including physical, financial and emotional exploitation). The key word that describes my attitude, approach and actions on a day to day basis as a Yoga Teacher is Professional.

2.I shall keep up to date with developments in Shanti Yoga<sup>™</sup> principles and techniques, professional and social issues. Succesful teaching requires technical, business, personal and social skills and an ability to deal with a rapidly changing profession, society and economy. My commitment to continuing professional education and personal development will provide a relevant service to my students.

3. I shall instruct within the scope of my expertise and understand and respect my and the student's limitations.

4. I shall instruct from premises and use practices that are safe, legally compliant and conducive to the healing process.

5. I shall be mindful of and instruct in accordance with the ethical precepts of my profession.

6. I shall compile and maintain thorough and legible student records.

7. I shall maintain professional indemnity insurance for the protection of my students and myself.

8. I shall respect the confidence of the therapeutic teacher-student relationship to promote trust and confidence in my profession and myself. *Clear and honest communication is fundamental to the teaching process.* 

9. I shall provide accurate information to my student on practices, procedures and risks, to in respect of the student's autonomy to be active in the healing process and allow the student to make the appropriate and proper decision affecting their health and wellness and consent for practice.

10.I shall place my student's interests above my own.

The health of the student comes first, not my convenience or financial gain.

ii. I undertake to keep the Board of Management informed as to my change of address or relevant details.

iii. I agree to be bound and abide by all rules and regulations established by the SYTA.

iv. The foregoing information about myself, my practice, my qualifications, etc., are true and correct in every respect.

Additionally, permission is granted by me, ......the applicant, for my name to be included in the SYTA newsletter etc, as intending to apply for membership and/or upgrading, at the Board's discretion.

Read and accepted by me on this ...... day of ...... 2013

#### PART F - PAYMENT (levels 1, 2 & 3) Renewal Fee due 31 August annually

Signature of Applicant ......Date.....Date.

Payment accepted by visa, mastercard, eft or paypal. Mail, fax or scan and email application to SYTA. Enquiries Ph: (617) 5531 0511 EFT to The Meditation Institute: BSB: 484 799 Acc: 161 551 280 Reference: SYTA2013