



Your name, as you wish it to appear on the website and in the catalogue.

Program Title

Date Submitted (MO/YR)

## Kripalu Center for Yoga & Health Program Proposal

### Section 1: Presenter Information

Presenter Name \_\_\_\_\_

Co-Presenter Name(s) [if applicable] \_\_\_\_\_

Complete Mailing Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

City

State

Zip

Phone # \_\_\_\_\_ E-mail \_\_\_\_\_

Alt. Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Website(s) \_\_\_\_\_

IMPORTANT: Please provide the following information: I am a US citizen  Yes  No

If no, I am a citizen of [what country] \_\_\_\_\_ Type of US Visa \_\_\_\_\_

Work authorization in the United States  Yes  No

If yes, what type of work authorization do you have? \_\_\_\_\_

I work for a foreign company authorized to do business in the US  Yes  No

Company Name \_\_\_\_\_ EIN \_\_\_\_\_

Resume/curriculum vitae: You must attach a resume or curriculum vitae to this proposal form. In addition, you are welcome to include any supporting materials (such as brochures, flyers, CDs, DVDs, and books). Please note that **proposals will NOT be considered without a resume or curriculum vitae attached**. Use the space below to provide a list of the materials you are including along with your completed proposal form.

Section 2: Proposed Program Description

Subject area(s): (Check all that apply.)

- Yoga                       Self and Spirit                       Outdoor or Fitness    Wellness and Bodywork  
 Meditation                       Creative (e.g., Music, Art)    Children                       \_\_\_\_\_

Working title \_\_\_\_\_

Possible alternate title \_\_\_\_\_

- Preferred program format:       Weekend (usually two days)  
                                                  Midweek (2–5 days)

Projected Attendance \_\_\_\_\_ Please provide the basis for this projection by describing the history of your workshop, including where it has been held, when it has run, how many people attended, and what the duration of the program was.

Maximum (if applicable) \_\_\_\_\_

Note that Kripalu *does* have maximum room capacities but does not generally cap programs. Kripalu expects presenters to teach their workshops even if fewer than 10 participants are enrolled. It is Kripalu’s right to cancel programs, not the presenter’s, and low enrollment will not nullify any contractual agreement. If there is a maximum, please describe why.

Overview: Briefly describe this program. Even if you include supporting materials, please give a concise overview in the space below.

**Program Objectives and Goals**

As a result of taking this program, the program participants will:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Main Activities: Please describe briefly the experiential components of your program. What activities will your participants be doing during your program?

Delivering the Kripalu Experience: Kripalu holds a high priority on a guest experience that includes mind-body awareness, personal transformation, and integration and preparation for returning home. How will your program facilitate these experiences?

Please provide a rough daily outline of your program:

Program Experience: Please rate the following activities as a percentage of the entire program experience. If multiple activities occur simultaneously (such as loud drumming during dance), note that your cumulative percentage may be greater than 100%.

____% Yoga	____% Lecture/Discussion	____% _____
____% Movement	____% Quiet/Meditative	____% _____
____% Dance	____% Soft Music	____% _____
____% Bodywork	____% Loud Music or Drumming	____% _____

Continuing Education Credits/Units:

Has this program ever qualified for CECs/CEUs?  Yes  No  
 Do you expect this program to qualify for CECs/CEUs at Kripalu?  Yes  No

- |                                                      |                   |
|------------------------------------------------------|-------------------|
| <input type="checkbox"/> Athletic Trainers (BOC)     | # of hours _____. |
| <input type="checkbox"/> Bodyworkers (NCBTMB)        | # of hours _____. |
| <input type="checkbox"/> Certified Counselors (NBCC) | # of hours _____. |
| <input type="checkbox"/> Nursing (CS, NP, RN, LPN)   | # of hours _____. |
| <input type="checkbox"/> Psychologists (PSY)         | # of hours _____. |
| <input type="checkbox"/> Registered Dietitians (RD)  | # of hours _____. |
| <input type="checkbox"/> Social Workers (SW)         | # of hours _____. |
| <input type="checkbox"/> Yoga Instructors (YA)       | # of hours _____. |
| <input type="checkbox"/> Coaches (ICF)               | # of hours _____. |

Prior History with Kripalu:

Have you ever been to Kripalu?  Yes  No If yes, what program(s) did you take?

Have you taught at Kripalu in the past?  Yes  No If yes, please give a brief account of the program(s), including the dates.

Have you ever assisted another presenter's program at Kripalu?  Yes  No If yes, please describe the program(s), including the dates.

Have you had a program scheduled at Kripalu that was cancelled?  Yes  No If yes, when? For what reason? Please include the date, title, and number of guests registered at the time of cancellation in addition to any special issues.

## Marketing

Presenters are responsible as partners in promotion to ensure the success of their program. Although Kripalu Center will promote your program through our catalog and website, presenters must demonstrate their capacity to market their own work. Please check the methods of marketing you currently employ, fill in the blanks with numbers, and provide any additional methods of advertising you plan to use to promote your program:

- E-mail Mailing List
  - Number of recipients \_\_\_\_
  - Frequency \_\_\_\_
  - Est. % in the northeastern US \_\_\_\_
- Snail Mailing List
  - Number of recipients \_\_\_\_
  - Frequency \_\_\_\_
  - Est. % in the northeastern US \_\_\_\_
- Website
  - Number of hits per month \_\_\_\_
- Newsletter
  - Number of recipients \_\_\_\_
  - Frequency \_\_\_\_
  - Est. % in the northeastern US \_\_\_\_
- E-Blast
  - Frequency \_\_\_\_
- Facebook
  - Number of Likes/Friends \_\_\_\_
- Twitter
  - Number of Followers \_\_\_\_
- Video Clips (from YouTube or your website)
  - Links:

In addition to the methods listed above, what networks are you affiliated with that you can advertise through? Do you have connections with northeastern networks? Please be specific and describe your affiliations in detail.

Section 3: Proposed Program Production Requirements

Daily Program Schedule: Most of the programs at Kripalu follow the same standard schedule (as shown below). If you propose using a different schedule for your program, please describe (in detail) how you would like your sessions to deviate from the standard schedule.

Standard Kripalu Schedule	
OPENING NIGHT	7:30 pm–9:00 pm (or 9:30pm)
Quiet Hours	9:30 pm–5:30 am
Morning Kripalu Yoga	
Breakfast	
Morning Session	3 hours (start between 8:30 and 9:30)
Lunchtime Activities	
Lunch	
Afternoon Session	2 hours (start between 1:45 and 2:45)
Afternoon Kripalu Yoga	
FINAL AM SESSION	2 hours (start 9:00 or 9:30)

- I will follow the standard Kripalu schedule.
- I prefer to follow a different schedule. (Please note that alternate schedules cannot be guaranteed.)
- Added evening session(s)
  - Which days? Please list all: \_\_\_\_\_
  - What times would you prefer? \_\_\_\_\_
- Extended morning session hours
  - Which days? Please list all: \_\_\_\_\_
  - What times would you prefer? \_\_\_\_\_
- Extended afternoon session hours
  - Which days? Please list all: \_\_\_\_\_
  - What times would you prefer? \_\_\_\_\_
- Other unusual scheduling issues
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Floor Preference: Please indicate if you have a specific floor preference for your program room. **Note** We cannot guarantee your request, but will make every effort to accommodate.

Carpet     Wood     No Preference

### On-Site Production

Kripalu provides a Production Team that will

- Provide initial session set up for your program room
- Serve as your liaison to Kripalu, answering any questions you may have about procedures, facility timetables, kitchen procedures, access to supplies, etc.
- Meet with you in person prior to your program to review all of your program production needs
- Brief you on the usage of audio and visual equipment
- Be on-call at all times during your program
- Brief you on the usage of your program room while your program is not in session.

Special Production Needs: Please let us know about the special production aspects of your program.

Equipment needs (e.g., A/V requirements [projection screens, computers, etc.], fitness equipment, etc.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Specialized program setup (e.g. easels for painting) \_\_\_\_\_

Off-site excursions or field trips \_\_\_\_\_

Special food requests (explain in detail) \_\_\_\_\_

Special rentals (skis, bikes, etc.) \_\_\_\_\_

Other (heated room, fire pit, sweat lodge, etc.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Special Program Supply Needs: Kripalu provides standard supplies in all program rooms, including yoga props (mats, pillows, backjacks, blocks, and straps), pens, and paper. Please let us know what additional supplies you will need for your program and how much you expect the costs will be per program participant (e.g., \$5 per person for oil pastels; \$20 per person for program manual).

\$ \_\_\_\_\_ for \_\_\_\_\_

\$ \_\_\_\_\_ for \_\_\_\_\_

\$ \_\_\_\_\_ for \_\_\_\_\_

\$ \_\_\_\_\_ for \_\_\_\_\_

\$ \_\_\_\_\_ TOTAL