

# Application to TEACH YOGA at Triyoga w LQ, 1341 Main St, Cincinnati, OH 45202

[www.TriYogawithLQ.com](http://www.TriYogawithLQ.com)

We are a yoga boutique with great instructors giving students personal attention. We all pay rent to keep our unique urban yoga space running, and build our yoga clients.

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Cell: \_\_\_\_\_ Address: \_\_\_\_\_

## Day & Time(s) You Request to Teach, your Yoga Style or Class Name

Day(s) and Time(s) \_\_\_\_\_ Class Name \_\_\_\_\_

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## Rental Fees

Teach 1 class/wk - \$35/class, reduces to \$30/class in month 2, \$25/class in month 3

Teach 2 classes/wk - \$20/class, reduces to \$15/class in month 2

Discount: Refer a yoga instructor and when he/she joins us, your current rent will be reduced another \$5/class for as long as your referred instructor teaches at 1341 Main St.

## Commitments & Rights

Your desired commitment to rent the space is for \_\_\_\_\_ months, starting  
\_\_\_\_\_ (month/year)

Instructor has right to renew her specific class times/days, before offered to another.  
Instructor decides what to \$ charge/class, and keeps all proceeds.

Instructors encouraged to post photos and videos on TriYoga FB & Instagram pages.

Instructor will provide LQ with 5x7 photo for yoga studio window display, and digital photos of you and a short bio for our web & social media advertising and promotion.

Rent is due the 30<sup>th</sup> of the month prior to the rental month. Write check to: LQ Consulting, with yoga in subject line. Laure Quinlivan has the right to audit all classes, gratis. LQ's TriYoga classes are open to any of our instructors to take for free.

Comments or Questions:

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References: (Two Yoga-related and One Personal)

Name\_\_\_\_\_ Cell/Email\_\_\_\_\_

Name\_\_\_\_\_ Cell/Email\_\_\_\_\_

Name\_\_\_\_\_ Cell/Email\_\_\_\_\_

Yoga Certifications and Year Awarded:

\_\_\_\_\_ Certifications Provided\_\_\_\_\_

Are you CPR certified? \_\_Yes \_\_\_No      Do you have insurance? \_\_\_Yes \_\_\_No

Do you have certified instructor friends who will sub your class? \_\_\_\_\_

If so, provide contact (s):

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Signature of Instructor\_\_\_\_\_ Date\_\_\_\_\_

Studio Owner Laure Quinlivan\_\_\_\_\_ Date\_\_\_\_\_

Return to: [laurequinlivan@gmail.com](mailto:laurequinlivan@gmail.com). 513-520-4809 Cell. Call me with any questions!