

## **Cultivating Mindfulness: Yoga, Meditation & Breath    October 10. 2010**

CE: 8 contact hours (9:00 am - 6:00 pm)

Prerequisites: None.

### Course Description:

In this calming and grounding one-day class, we will learn to cultivate mindfulness in our body and in our massage practice. We will begin the day with yoga and simple pranayama breathing techniques to calm our mind and relax the body. We will learn about the strong connection between Yoga and Thai yoga massage, learn the Sanskrit names of the poses, practice them, and embody them. Participants will receive a Certificate of Completion for 8 NCBTMB, THAI, NCCAOM, and Yoga Alliance CE hours.

### Instructor:

Eric Spivack, LMP/Dipl.Ac. is a Thai massage instructor who has studied with master teachers in Thailand and holds certificates from several Thai institutions. Eric is both a nationally certified massage therapist and acupuncturist, as well as, a certified Viniyoga instructor. Eric graduated from the Brian Utting School of Massage in 1994 and received a Master of Acupuncture degree from the Northwest Institute of Acupuncture and Oriental Medicine in 2002. Prior to studying massage and acupuncture, Eric earned a master's degree in Environmental Science in 1992.

He has been in practice for over 15 years, has been teaching continuing education workshops for over 13 years, and is an approved provider with NCCAOM, NCBTMB, and THAI. He is considered a fun and attentive instructor with a deep passion for his work.

### Location:

The Yoga Den \* 514 - 12th Ave, Suite B \* Seattle \* WA \* 98122

### Fees, Registration and Deadlines:

\$160 when registered and paid in full 2 weeks prior to the workshop; \$190 thereafter.

### Cancellation, Deposits and Refund Policy:

A \$100 non-refundable deposit is required to reserve your place in the class. If you cancel with less than two weeks notice, your tuition will be forfeited. In the event the workshop is cancelled by the instructor, a 100% refund will be issued.

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**Registration Form**

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Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone (    ) \_\_\_\_\_ - \_\_\_\_\_

Please enclose your check made payable to 'Eric Spivack' and mail along with completed form to:

Eric Spivack  
2119 17<sup>th</sup> Avenue South  
Seattle, WA 98144

Phone: 206.726.1785  
Email: [Eric@SoaringCraneMassage.com](mailto:Eric@SoaringCraneMassage.com)