**Application**

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

Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

City, State, Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. How did you hear about our teacher training?
2. Did any of our instructors impact your decision to do teacher training?

Who?

1. How many years have you been practicing yoga? Where do you practice? How many hours a week? What type and styles?
2. Tell me about your most memorable experience taking a yoga class?
3. What subjects/topic excites you most about this teacher training? Why?
4. Which specific aspects of this teacher training attracted you?
5. List your goals/intentions as you embark on this transformational journey:
6. Do you have a religious or spiritual practice? Explain.
7. Describe a typical day of your life:
8. Your Health:
   1. Are you taking any medications?
   2. Do you have any allergies?
   3. Are you suffering from an injury?
   4. On a scale of 1-10 (10 perfect) how is your emotional and mental health?
   5. What other physical activities and sports are you involved in?
9. Do you have any dietary restrictions or preferences?

*We do our best to accommodate the request and needs of our teachers in training. We feel it’s important to have a clean and healthy diet during this time. We go the extra mile to cook and prepare with organic and hormone free meats, fruits and vegetables.*

*-Cally Burkle and Jaime Ellerie*

12. Are there any dates of our upcoming teacher training schedule that you will not be able to attend?

*\*\*These answers are kept confidential amongst our teacher training staff.\*\**

**Payment:**

We offer you the option to pay in installments. However, you must be paid in full to receive your certificate and ask that you make payments along the way and you paid in full at graduation or close to it.

**$500 Down Payment** - Free to begin practicing one month before training date. Please provide your planned payment schedule:

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| --- | --- |
| Amount: | Date: |
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**$2600 Full Payment** - Free starting as soon as you pay in full after dates are announced!