

# 200 hour Namaste Yoga Studio Teacher Training Application

## September 2019-June 2020

(Feel free to use other paper to type/write your responses.)

Date

Name

Address

Phone (s)

Email address

Website (if applicable)

Current Occupation

Where do you currently practice yoga and with what teachers?

What does yoga mean to you? Has yoga changed your life in any way?

How long have you been practicing yoga? Describe your personal practice of yoga and how regularly you practice. What style(s) of yoga have you or do you practice?

What is your intention in participating in this teacher training?

Are there any physical or psychological condition(s) of which the teaching staff should be aware?  
How do you handle these conditions in life and yoga?

What skills/qualities do you feel you bring to this program?

Do you have any previous yoga, massage therapy, reiki, or other training of which the teaching staff should be aware?

Have you taken any workshops or special programs that you would like to mention? Please list them here by Title, location, date and number of hours.

In case of emergency, please contact:

Name/phone:

Physician/phone:

Other doctor or practitioner/phone:

I hereby declare that the above information is true to the best of my knowledge. I understand that misrepresentation of this information is unethical and constitutes grounds for revocation of certification.

I am aware that any exercise program involves a risk of injury. I have consulted with my physician and other relevant practitioners and have no known health conditions that could be adversely affected by my practice of yoga. I voluntarily assume risk of injury and release Namaste Yoga Studio and the directors and assistants of the teacher training from any and all liability.

Signature \_\_\_\_\_ Date \_\_\_\_\_