



Application Form for Being Yoga Teacher Training

(all information is private and confidential)

Name: _____ **Birth Date:** ____/____/____

Address: _____

Phone: (h) _____ **(w)** _____ **(m)** _____

Email : _____ **Occupation:** _____

Emergency Contact: _____ **Ph:** _____

Please describe your previous yoga experience including relevant styles, teachers, inspirations etc. Include duration & frequency (attach another sheet if required):

What do you want to gain from attending this course:

Do you want to be a Yoga Teacher? YES NO UNSURE

If yes, why? _____

Deposit

A \$250 deposit is required by March 14, 2009. Payments can be made by cheque, credit card or direct deposit into Being Yoga ANZ account 486231887 / BSB 014 556

Your Commitment:

Beyond the obvious financial commitment, there is also a necessity to immerse yourself thoroughly in the teaching. Our only requirement is that you show up, diligently. Your commitment to us, as your teachers is to apply the wisdom offered throughout the course in your life, seeking support and guidance where applicable.

I have read and understood the questions and accept the conditions of this application.

Signed: _____ Date ____/____/____

Please forward your completed application to above address to register your interest. The deposit can be paid later.