



Application Form 200 hour Yoga Teacher Training

Full Name:

Address:

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Contact Tel No: Date of Birth:

E-mail address:

Training Date Applied For:

Any Existing Yoga Related Qualifications:

School

Qualification

Date Attained

Training Hours Contact Non-contact

Any other relevant qualifications or experience

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Please let us know if you have any special needs.

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Do you have any medical conditions that should be disclosed to the tutors or that may prevent you from taking part in any aspect of the course?

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What's your yoga experience? Styles of yoga, where, how often etc.

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How long have you been exploring yoga?

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Who are your teachers?

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What's your motivation and inspiration for attending a 200hr YTT?

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Why have you chosen this 200hr YTT course?

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I understand that my details will be disclosed to my tutor(s) and administration staff for the purposes of this course. I understand that the course providers may take photographs, videos and recordings during this course for trade and or marketing purposes. I understand that all information provided to me (the course participant) is solely for the purpose of my training (the course participant) and not to be distributed or otherwise used without the course providers consent.

I understand that the full cost of the course is non-refundable and is only transferable at the discretion of the course provider.

Does your current lifestyle and schedule allow you to participate fully in this course, including during residential course dates (where applicable) and to complete home study assignments? (Yes or No)

Signed Dated

Thank you for completing your application form and for your interest in our course.

Please e-mail this form to training@wakingmindsyoga.co.uk

Once your application has been processed we will contact you and provide you with an invoice and payment details.

Namaste