

# Birmingham Yoga 2011 Teacher Training Program Application Form

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

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

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

Do you need housing? \_\_\_\_\_

Emergency names and numbers:

1. \_\_\_\_\_

2. \_\_\_\_\_

Non-refundable \$250 deposit

\_\_\_\_\_ check# \_\_\_\_\_ cc#

## APPLICATION QUESTIONNAIRE

Let us know about you.....

List your yoga history including teachers, how long you have practiced, and what type of yoga you enjoy.

---

---

---

List any other trainings or interests you think would apply.

---

---

---

What is your interest in participating in this program?

---

---

---

**What do you hope to get from our year together?**

---

---

---

**Briefly describe your physical health history.**

---

---

---

**Briefly describe your mental health history. Please include any history of disorders, depression or chronic problems.**

---

---

---

**Are you currently on any medications? List any you have taken in the last 12 months.**

---

---

---

**If you are planning a pregnancy during this program year, are you willing to follow the advice from the facilitator regarding your asana practice?**

---

---

---

**Do you have a history of abuse or have you ever experienced violent behavior?**

---

---

---

**Describe your food habits and lifestyle.**

---

---

---

**How did you hear about our program?**

---

---

---

**List any additional information you would like us to know.**

---

---

---

**Application checklist:**

- \_\_\_\_\_ Completed Application Form
- \_\_\_\_\_ Two (2) letters of reference (one should be yoga-related)
- \_\_\_\_\_ Application Questionnaire
- \_\_\_\_\_ \$250 Deposit

**Mail completed application package and any correspondence to:  
Birmingham Yoga Teacher Training Program**

**Birmingham Yoga  
901 Masters Lane,  
Birmingham, AL 35244**

**205-427-2171  
www.yogainbirmingham.com  
E-mail: birminghamyoga@gmail.com**