

**Birmingham Yoga 2010 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. birminghamyoga.com
E-mail: contact@birminghamyoga.com**