

300 hour Yoga Teacher Training Application

Name _____

Date: _____

Address _____

City _____ Zip _____

Phone () _____

Email _____

How did you learn about the Soul Tree Teacher Training program?

(please check all that apply) I practice at Soul Tree Internet Search My yoga teacher recommended it (please list teacher's name): Advertisement (please list source): _____ A friend told me about it other _____

1. Please tell us about your teaching experience:

2. List your previous Yoga Training:

3. What do you hope to achieve at the completion of the program?

4. Why are you choosing this particular advanced training to deepen your education?

5. The work we will be into might get challenging and at times be uncomfortable. Vulnerability is a must to get the most out of this training. Are you willing to explore your depths to reveal your gifts?

What are your patterns when life challenges you?

What can you do to stay committed?

6. Please share any medical history below so that we can be sure to respond to any emergencies should they occur during your training.

Any condition that might affect your participating in the program and practicing and teaching yoga. All information that you provide in this application, to the Program Director, or to any of the instructors will be held strictly confidential.

*Please note that your responses to medical history will not exclude you from being accepted into the program.

7. Please list anything else that you would like your instructor to be cognizant of to help ensure the best experience possible.

We look forward to this incredible opportunity to be alongside you as we deepen ourselves into Yoga as our life path. Sarah Woods & the Soul Tree YTT staff You may return this application by email to Sarah@soultreecolorado.com or drop off at the front desk. The enrollment agreement and deposit are both due to reserve your space.