

Feel Good Yoga - Teacher Training Application Form

The following information will be sent in confidence to Feel Good Yoga and Pilates. Your application will be reviewed and you will receive a reply as soon as possible.

Please provide the following information in any format you prefer.

Namaste.

1. Name:
2. Address:
3. Phone:
4. E-Mail:
5. Date of Birth:
6. Number of Dependent Children (if any):
7. Please describe your background with yoga:
8. Please answer the following questions:
 - a. Do your religious/spiritual beliefs conflict with the presentation and discussion (in the context of this program) of Eastern religious and philosophical systems?
 - b. Have you studied any other eastern system of the body (tai chi, acupuncture)?
 - c. Have you practiced meditation or pranayama? If so, describe your practice.
 - d. Do you suffer from any disabilities, injuries or medical conditions?
 - e. Have you studied any Western-based system of the body (dance, Pilates)?
 - f. How did you hear about our program?
 - g. What would you like to gain from this program?
 - h. Are you currently teaching yoga?
 - i. Are you using any prescribed medication?
 - j. Have you been recommended by a physician NOT to practice yoga?
9. Please add anything else you would like us to know.