



body mind & core

## Yoga Teacher Training Program APPLICATION FOR ADMISSION

Please do your best to provide complete and accurate information, all of which will be kept private and confidential. A non-refundable deposit of \$100 is due upon receipt of this application and will be applied to your tuition if you are accepted. Full tuition is \$3,200 paid in full or set up as \$3,400 installment payment. Last payment due by training graduation. For complete information on the program, registration, requirements, and certification, please visit [bodymindandcore.com](http://bodymindandcore.com)

### I. CONTACT

Legal Name:

Mailing Address:

Telephone:

Email:

Website:

#### *Emergency Contact Information*

Name:

Relationship:

Telephone:

### II. HEALTH

Please describe any physical or mental health conditions that might affect your participation in this program. List any medication you are presently taking. List any surgeries you have undergone in the past ten years. List any chronic pain, joint strain, muscle strain or other physical issues that you presently have or ever feel in the course of a normal day or in practicing yoga. Indicate if you are pregnant or recently gave birth (within the past 18 months). Please attach additional sheets of paper as necessary to provide accurate and complete information as requested here. Please feel free to add any other health-related information you wish to bring to our attention. All of your personal health and medical information will be kept strictly confidential.

Do you or have you ever had any of the following? If so, describe (and add details below).

<i>Condition</i>	<i>Description</i>
Arthritis	Yes/No
Back Trouble	Yes/No
Epilepsy	Yes/No
Eye Problems	Yes/No
Diabetes	Yes/No
Hearing Problems	Yes/No
Heart Trouble	Yes/No
Hiatus Hernia	Yes/No
High or Low Blood Pressure	Yes/No
Migraine Headaches	Yes/No
Joint Sprains	Yes/No
Joint Dislocations	Yes/No
Respiratory Complaints	Yes/No
Spine Conditions	Yes/No

Other Health Conditions (describe)

### III. YOGA EXPERIENCE

1. How long have you been consistently practicing yoga?

2. What types of yoga have you practiced? Please indicate how long you have practiced each type.

3. How often do you practice? Please indicate, practice at home, with friends, etc.
  
4. Please list the name(s) of your current yoga teacher(s).
  
5. What yoga teachers have most influenced your practice? Please briefly summarize their influence on your practice.
  
6. List yoga workshops you have attended in the last three years. Please give approximate date, venue, and instruction. (Continue on a separate sheet if necessary.)
  
7. List titles and authors of yoga books you have read. (Continue on a separate sheet if necessary.)
  
8. Have you previously participated in a yoga teacher training program? If so, please indicate when, where, and with whom as the principal instructor(s).
  
9. Do you currently teach yoga? If so, please indicate dates, location, and style.
  
10. What first motivated you to practice yoga?
  
11. Why do you practice yoga now?
  
12. What are your main interests or hobbies outside of yoga?

13. What qualities (from your education, work experience, life experience) do you think you would bring to this program?

14. What are your goals in this program?

### **III. DECLARATION**

I have read and understand this entire application and the terms and conditions covered in the complete Yoga Teacher Training. The facts set forth in this application are, to the best of my knowledge, true and complete.

Signature:

Date:

Please send or deliver your completed Application for Admission along with your \$100 deposit to:

*Body Mind & Core  
1344 S Rangeline Rd Suite 201  
Carmel, IN 46032*

Should you have any questions, please call (317) 696-0720 or email [info@bodymindandcore.com](mailto:info@bodymindandcore.com). Thank you for your application!