YTT Application

Name: Street Address: City and Postal Code: Home Phone: Cell Phone: E-mail Address:
Yoga Experience: Please summarize your yoga experience! i.e. How long have you been practicing? How consistent is your practice? What styles of yoga have you explored? How many studio has you practiced at?
Why YTT? Please summarize why you're interested in participating in YTT.
Wellness Please outline your emotional and physical state of wellness. Feel free to express how your yoga practice supports.

Person to Notify in Case of Emergency
Name:
Street Address:
City and Postal Code:
Home Phone:
Cell Phone:
E-Mail Address:
Agreement and Signature: By submitting this application, I affirm that the facts set forth in it are true and complete Accompanying this application is the first installment of my tuition.
Name (printed):
Signature:
Date: