

Application Form
A Jewel in the Lotus Yoga 200 hour Level Yoga Certification

Name: _____

Address: _____

City: _____ State/Zip code: _____

Home Telephone: _____ Business Telephone: _____

Mobile Telephone: _____ Email Address: _____

Age: _____ Occupation: _____

Limitations or disabilities, if so please explain: _____

Reason for taking Yoga Teacher Training: _____

Years studied Yoga: _____ Where: _____

Influential Teachers: _____

Yoga Experiences: _____

Are you currently enrolled in a yoga class?: _____

If so, where: _____

Are you presently teaching yoga?: _____ Number of years teaching yoga: _____

Previous Teachers Training experience: _____

Certifications: _____ CPR Certified: _____

I hereby commit to participate in and complete **A Jewel in the Lotus Teachers Training Program**. I understand that certification is granted upon successful comprehension and mastery of the principles and practices of yoga. I hereby commit to be prepared for a written and practical mid-term examination & final examination.

Signature: _____ Date: _____

Enclosed is a \$200.00, non-refundable fee for _____ month _____ year Semester _____
please initial

