

Samadhi Yoga Teacher Training Application

Name: _____

email: _____

Phone#: _____

Address: _____

1. How long have you been practicing yoga? _____

2. What is your background in yoga study? What method(s) have you studied and practiced?

3. Do you have any physical limitations, injuries or medical conditions that could affect your involvement in the program? Please describe.

4. Are you interested in teaching or just more in depth study?

5. Do you currently teach yoga? If so, for how long, describe your style, where you teach, and how many classes per week?

6. What is your level of education, specific degree(s) attained, and current professional occupation ?

7. Do you have a regular home asana and/or meditation practice?

8. What motivates you on this path and what are your personal expectations of this program?

9. How did you hear about Samadhi's teacher training?

Send this questionnaire and registration deposit to:
Samadhi Yoga Center
1205 East Pike St. #1B, Seattle, WA 98122 Attn: Teacher Training