



Core Yoga Teacher Training 2010-2011 Application

Name _____ Age _____ Gender _____
Address _____
Phone number _____
e-mail address _____

Occupation _____

Emergency Contact _____ Relationship _____
Phone number _____ e-mail _____

Describe any health concerns, mental and physical, and course of treatment.

Describe any limitations you are aware of which impact your yoga practice.

Short essays:

1. Describe your background with yoga.
 - How long have you been practicing?
 - What style of yoga do you practice?
 - With whom have you been taking classes?
 - With what frequency have you been practicing?
2. Describe your personal practice.
 - Intention
 - Duration
 - Frequency
 - Composition
 - Effects you care to share
3. Who is/ are the teacher(s) who have inspired you? What was it about their teaching and what did it elicit from you?

4. Why is it you want to take a yoga teacher training? What is your intention?
5. What is yoga for you?
6. Why are you interested in this particular teacher training course? What would you like it to be for you?

**Send completed applications to Debbie Cohen PO Box 380064 Cambridge, MA
02238**

Or e-mail drc@coreyoga.com.