



Name:

Email:

Phone Number:

Address:

## Background & Experience

Tell us a little about your yoga background and experience. How long have you been practicing, what benefits/challenges do you face, do you have a home practice, do you have meditation practice, etc?

## Why Yoga?

What motivates you to practice yoga? Are there any teachers/mentors that influence your practice and why?

## Where do you practice?

Where do you currently practice yoga, with whom do you practice, what styles?

## Teacher Training

Why are you interested in a teacher training program? Why join innerglow yoga's YTT specifically?

## Teaching Experience

Do you have any teaching experience? Please describe:

## Great Teachers

What qualities do you think makes a great yoga teacher and why?

## Then what?

Aside from becoming eligible to receive a Yoga Alliance certification to teach yoga at the 200-hr level, what do you hope to gain from innerglow yoga's training program?

## Health Conditions/Injuries

Do you have any conditions and/or injuries we should know about?

## Commitment

Are you able to fully commit and participate in innerglow yoga's YTT program?

Please review the program schedule prior to submitting this application.

Please remit a \$500 NON-REFUNDABLE deposit with this application. If you have any questions, please contact Michelle 508-477-9642 or [michelle@innerglowyogacapecod.com](mailto:michelle@innerglowyogacapecod.com)