

MINDFUL TURTLE 85-HOUR ADVANCED YOGA EDUCATION COURSE APPLICATION FORM

Name: _____ Date: _____

Address: _____

Email: _____

Phone: _____ Birth Date: _____

Emergency Contact: _____

Are there any physical or psychological conditions that we should be aware of to support you in this training? _____

How did you find out about this training (if referred by someone, who?): _____

How long have you been practicing yoga and how regularly (times per week)? _____

What style of practice are you accustomed to? _____

Limbs or aspects of yoga that you currently practice/experience with yoga postures, breathing, meditation, philosophy _____

Who or what has influenced your yoga practice most? _____

What inspires you to take this training at this time in your life? How do you intend to apply your advanced knowledge to your life? _____

Please include some preferred days/times to have an interview, and whether you prefer to meet in person at Mindful Turtle or through video call _____

If you do not regularly practice with Jackie, please include a reference from a yoga teacher.