



## Anusara® Yoga Immersion and Teacher Training Programs Application

Date \_\_\_\_\_

How would you rate your knowledge of anatomy? \_\_\_\_\_

Name \_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_

Please describe your current yoga practice.

City/State/Zip \_\_\_\_\_

\_\_\_\_\_

E-mail address \_\_\_\_\_

Do you currently teach yoga? \_\_\_\_\_

Home phone \_\_\_\_\_

Where? \_\_\_\_\_ For how long? \_\_\_\_\_

Cell phone \_\_\_\_\_

How many classes per week? \_\_\_\_\_

Date of birth \_\_\_\_\_

What style? \_\_\_\_\_

Education \_\_\_\_\_

Do you have any physical injuries or medical conditions? Describe them.

\_\_\_\_\_  
(Include any education that would provide background for this training.)

Why do you practice yoga? \_\_\_\_\_

How long have you been practicing yoga? \_\_\_\_\_

\_\_\_\_\_

Have you practiced Anusara yoga? \_\_\_\_\_

\_\_\_\_\_

How long? \_\_\_\_\_

Why are you interested in this particular training and what do you hope to gain? \_\_\_\_\_

Please list all your studies of yoga, other trainings, teachers studied with, how often and for how long.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Thank you for your interest in the Bhava Yoga Studio's Immersion and Teacher Training Programs.

Please send application with a letter of recommendation from a yoga teacher, mentor, or employer.