



Name: _____

Address: _____

City / State / Zip _____

Phone #(s): Cell: _____ Other: _____

E-mail: _____ Birthday: _____

Emergency Contact: (Name & Relationship) _____ ER Contact # _____

Please list any physical or mental conditions, injuries, or impairments that may affect your participation in this program: _____

Participants of Shine’s 200 RYT Training Program are expected to have a basic understanding of the fundamental concepts of Yoga as well as experience with general yoga postures. Students should have 1 year minimum experience with practicing postural-based yoga (any style: hatha, vin, therapeutic, etc. is fine). This form is part 1 of our registration process. Students will also be asked in for a short interview before acceptance into our program. This interview is to validate previous yoga experience, to make sure travel to our studio works for the student, and to build a comfortable personal relationship before the training begins. Upon acceptance a contract will be issued with our schedule and pricing agreement.

Please attach a separate sheet to answer the following questions.

1. Please describe your personal Yoga background and practice experience. Include styles of yoga practiced/studied, primary teachers, length of practice, hours per week, strengths, challenges, etc.
2. What does Yoga mean to you?
3. Do you have a home Yoga or meditation practice?
 - If yes, please share more about it.
 - If no, is there something that has prevented you from establishing a home practice?
4. What is your motivation to enter this training program?
5. Please share any other body-mind-heart experience that you expect will enhance your skills as a Yoga teacher.
6. What are your expectations for this training? What do you hope to gain, learn, or work on in this program?
 Are there specific areas of studying you are hoping to explore in this teacher training? ex. alignment, philosophy, etc.
7. Do you have any questions or concerns about the teacher training program?

Personal referral for demo of basic Yoga understanding: _____

Addtl. Personal Reference: _____

Please let us know who we can thank for referring you to our teacher training program and list at least one other reference that we may contact to evaluate your understanding of the basic elements of Yoga practice. Include their name, relationship, email address, and phone number. (One of your yoga teachers is the ideal type of person to use for your reference.) You will also be required to meet for a short interview before you are approved to this program.
We will contact you upon reception of your completed application to continue the registration process.