

Amrit Method® of Yoga Immerison and Teacher Certification Level I
June 17-26 and/or September 2-11, 2011
Amrit Yoga Insitute | Salt Springs, FL
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Name _____ DOB _____ F _____ M _____

Address _____ City _____ State _____ Zip _____

Phones: Home _____ Work _____ Cell _____

Fax _____ Email _____

Occupation _____

What is the best way to contact you? _____

Please type your answers to the questions below and return the completed the application with:

- A letter of recommendation from your current yoga teacher.
 - A non-refundable application fee of \$500 (To be returned if applicant not accepted into this program; applied to program fee if accepted).
 - A recent photo of yourself
1. Describe your personal practice. You may want to include how long you have been practicing, where and with whom you have studied, and how often you practice.
 2. What do you feel you have to offer as a yoga teacher?
 3. What attracted you to Amrit Yoga Teacher Training? How did you learn about this training? (print advertisement, word of mouth, referral by (give name)).
 4. Please list seminars you have attended with Yogi Amrit Desai or the Amrit Yoga Senior Teachers.
 5. Do you have any other training or areas of expertise that would enhance your proficiency as a yoga teacher?
 6. Have you attended any other yoga trainings or seminars? If so, please list.
 7. Are you presently teaching or have you ever taught yoga? If so, for how long, when, where, what style, how many classes and students?
 8. Are there any physical, mental or emotional conditions that would prevent you from participating fully in this program?
 9. What else would you like us to know about yourself?

Mail to: Amrit Yoga Institute ● P.O. Box 5340 ● Salt Springs, FL 32134

_____ E-mail: info@amrityoga.org Phone: 352-685-3001