

La Jolla Yoga Center

200-Hour Teacher Training Application



Start Date of Course _____

Name _____

Address _____

City, State, Zip _____

Home Phone _____ Cell Phone _____

Email _____ Date of Birth _____

Occupation _____

Emergency Contact _____ Phone _____

How did you hear about the program? _____



Medical History

How would you rate your overall health? Excellent Good Fair

(describe) _____

Do you have any current medical conditions such as epilepsy, diabetes, or are pregnant or plan on becoming pregnant during the training?

Is there anything else we should know about your medical history?



About You

Please answer the following questions briefly on separate paper (typed):

1. What styles of yoga and/or meditation do you practice & how long have you been practicing these styles?
2. Describe what yoga is to you.
3. Are you taking this training primarily to deepen your practice or do you plan on teaching?
4. Have you done a yoga teacher training course before? If so, which one(s)?
5. Do you currently teach yoga? If so, please describe your teaching style and purpose. If not, why do you wish to teach yoga?
6. What do you hope to gain from this class?



Application Process

Please submit your completed application to:

La Jolla Yoga Center
7741 Fay Avenue
La Jolla, CA 92037

Program Fees

Early registration (*pay in full by December 11th*)

\$500 Deposit

\$1,850 Remaining balance

\$2,350 Total

Includes unlimited yoga classes for 5 months

Regular Registration (pay after December 11th)

\$500 Deposit

\$2,100 Remaining balance

\$2,600 Total

Includes unlimited yoga classes for 5 months

*We will contact you upon receiving your application. In order to receive the early registration discount, full payment must be received by December 11th.