

Raja Yoga Institute

www.RajaYogis.net 858-459-0880

Raja Yoga Advanced Studies & Teacher Training

2012 Application Form

First name _____ Middle Initial _____

Last Name _____

Address _____

City _____ State _____ Zip Code _____

Telephone number (Work) _____

Telephone number (Home) _____

Cell phone number _____

Email _____

Emergency Contact Name _____

Emergency Contact Phone Number _____

Date of Birth _____ Gender _____

Education/Degree _____

Occupation _____

Number of Years Practicing Yoga _____

Style(s) of Yoga Practice _____

Yoga Certification _____

Other Certification _____

Hobbies _____

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Please use additional sheets for the following questions:

1. YOUR PERSONAL YOGA JOURNEY

Please give a short description of your yoga experience. . Include details of any experiences that you feel have shaped your yoga journey.

2. YOUR PERSONAL PRACTICE

Please outline in as much detail as possible your weekly yoga practice schedule. Include how many times per week you practice, for how long and what you practice.

3. HEALTH AND WELL BEING

Please tell us of any injuries (old and new) that may affect your practice. Also please indicate if you are currently taking any medication or suffer from any illness.

4. YOUR PURPOSE AND ASPIRATION

Please share with us in as much detail why you are interested in taking this course and what would you like to gain and accomplish.

Please return the application:(1) Scan and email to michele@rajayogis.net
or (2) Return to La Jolla Yoga Center attention: Michele Hébert.