Pathway Yoga

Teacher Training Application

Name: _____

Email: _____

Phone number(s): _____

1. How long have you been an Intermediate Iyengar yoga student? Where?

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2. Briefly describe your home yoga practice. How many days a week do you practice at home, if at all? How long do you practice? What do you practice?

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3. Why do you want to join the Pathway Yoga teacher-training program?

3. Have you trained as a yoga teacher in another tradition? Do you currently teach yoga in another tradition? Please provide details.