



JOHNS CREEK YOGA

Teacher Training Course Application

To support you in preparation for this experience and to help us get to know you better, please respond to the following questions. Keep your answers conversational, usually about a paragraph and no more than one page per answer.

- Who are You?
- What is the essence of what you want to learn, experience and accomplish during this course?
- Why is this the right time in your life for Yoga Teacher Training?
- Please describe in detail any injuries or physical, mental or emotional limitations that may affect your participation.
- Please list any prescription medications you are taking or have taken in the past year, and what the medications are for.
- What special fits, talents or attributes do you feel you bring to this course and to your goals>
- How can we support you as you grow into your fullness as a Yoga Teacher?
- Will you commit to a minimum of one hour of personal yoga practice six days a week during YTT?