Yoga Teacher Training Application

Bending Bodhi Yoga Teacher Training Program

Thank you for your interest in our Yoga Teacher Training Program! This training is a transformational journey that requires commitment, dedication, and an open heart. Please take your time filling out this application thoughtfully and honestly.

Once your application is reviewed, we will reach out to discuss the program and ensure it's the right fit for you.

Personal Information

Full Name:	
Date of Birth:	
Email Address:	
Phone Number:	
Emergency Contact (Name & Phone): _	

Yoga Experience

- 1. How long have you been practicing yoga?
 - \circ \Box Less than 1 year
 - \circ \Box 1-3 years
 - □ 3-5 years
 - □ 5+ years

2. How often do you currently practice yoga?

- \circ \Box 1-2 times per week
- \circ \Box 3-4 times per week
- \circ \Box 5+ times per week

- 3. Where do you typically practice yoga (studio, home, gym, etc.)?
- 4. What styles of yoga do you practice most often?

Your Interest in Teacher Training

6. Why do you want to take this training? (Please be as detailed as possible.)

- 7. Do you intend to teach yoga after completing the training?
 - \circ \Box Yes
 - □ No
 - \circ \Box Not sure yet
- 8. What do you hope to gain from this training, both personally and professionally?

9. Have you taken any previous yoga trainings, workshops, or intensives? If so, please describe.

Physical & Medical Information

- 10. Do you have any injuries, chronic pain, or medical conditions that may affect your ability to practice or teach yoga?
 - □ No
 - □ Yes (please describe): ______
- 11. Are you currently under medical or therapeutic care for any condition?
 - □ No
 - □ Yes (please describe): ______

12. Are you currently pregnant or planning to be during the training?

- □ No
- \circ \Box Yes

Time Commitment & Availability

Our training requires **full participation** to receive certification. Please review the training dates and ensure you can fully commit.

13. Do you have any conflicts with the scheduled training dates?

- □ No
- □ Yes (please describe): _____

- 14. This training requires both in-person and independent study, including assigned readings, homework, practice teaching, and attendance at yoga classes. Are you able to make this time commitment?
 - □ Yes
 - □ No

Financial Commitment

The financial investment for this program is a serious commitment, and payment plans may be available.

- 15. Have you reviewed the program tuition and payment options, and are you prepared to make this investment in your training?
 - \circ \Box Yes
 - \circ \Box No (please explain any concerns):

Other Healing Modalities & Additional Information

16. Are you trained in any other healing modalities or movement practices? (Massage, Reiki, Pilates, therapy, etc.)

17. Is there anything else you'd like us to know about you and your journey?

Agreement & Signature

By signing below, I acknowledge that I have read and understand the time and financial commitments required for this training. I am fully committed to showing up for myself and my fellow trainees with an open heart and mind.

Signature:	
Date:	

Thank you for applying! We will review your application and be in touch soon. If you have any questions in the meantime, please feel free to reach out.

We look forward to being part of your yoga journey!