

# Kundalini Yoga Durham

## Application Form: Kundalini Yoga Level I Teacher Training

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Preferred Pronouns: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Former Professions: \_\_\_\_\_

Current Profession: \_\_\_\_\_

Educational Background: \_\_\_\_\_

How did you hear about the Kundalini Yoga Durham Teacher Training?

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1. What is your current experience with yoga/meditation? Where have you practiced, with whom, and how long? Do you have any yoga teaching certifications?
  
  
  
  
  
  
  
  
  
  
2. What is your primary reason for wanting to become a yoga and meditation teacher? What has inspired you?



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9. Are there any health concerns that we should know about?

10. Have you had any experience with leading classes or teaching? If yes, please describe:

11. If you are a parent, do you have reliable child care for evening/weekend classes?

12. Please give the names of two people not related to you, who are qualified to give a character reference. Please list names and phone number.

Please sign and print your full legal name, along with the name you would like to be addressed:

Print Legal Name: \_\_\_\_\_

Called by Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

A \$300 non-refundable deposit is required to hold your space which will go toward cost of the training.

Sat Nam. Thank you for your interest in teaching Kundalini Yoga and Meditation!