



Phone: 083 1677166
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Personal Information

I am applying for the: 200 hr.
Course start date:

First & Last Name:

Email:

Gender:

Address:

County:

Phone (Mobile/Home):

Birth Date (DD/MM/YYYY):

Emergency Contact:

Name & Phone Number:

Relationship:

Email/Address:

How did you hear about the Yoga loft Teacher Training program? Yoga Alliance
Facebook Internet Search Friend Other:

Yoga Experience

How long have you been practicing Yoga?

In which style/tradition do you practice?
Briefly describe your Yoga experience:

Do you have any experience teaching Yoga, and if so, how long have you been teaching and in which tradition/style?

Please describe any other spiritual or meditation practices, which are important to you:

Health Information

The following questions are here to help us provide each student with the necessary means to make the teacher training experience enjoyable for all. The answers to these questions will be kept in strict confidence, and may be discussed with the applicant to make sure that the teacher-training program is the right choice for them.

Are you currently taking medication for any physical or psychological condition? yes/no

Do you have any chronic physical limitations or disabilities? yes/no

If yes give details:

Do you have a history of psychological or emotional illnesses, or issues? yes/no

If yes give details:

Do you have a communicable disease? yes/no

If yes give details:

Have you had a serious illness or major surgery within the last five years? yes/no

If yes give details:

Are you currently pregnant or trying to become pregnant? yes/no

If yes give details:

If you answered YES to any of the above questions, please provide us with more relevant details as it would pertain to the teacher-training program. As well, please describe if there is anything else you feel we should know with regards to your participation in the program here:

In-Depth

This section is to help us gain a better understanding of your personal journey and experience with yoga and life, and your intention to learn more about yoga and share it with others through teaching. You may also choose to attach a separate document to answer these questions.

What has drawn you to Yoga?

Why would you like to become a Yoga teacher? Or, if you are taking the teacher training solely for your own development and personal growth, please share your intentions and expectations.

What does Yoga mean to you?

For you, what does it mean to be a Yoga teacher? And how do you see your role as a Yoga teacher?

Full Disclosure

Please make sure to read the following documents and write YES, to indicate that you have read and accepted the terms stated within each document.

Yoga Alliance Teacher Training Certification	YES / NO
Teacher Training Tuition	YES /NO
Spiritual Code of Conduct	YES / NO

I will be submitting my €500 EUROS Bank Transfer/Other

*The Yoga loft Studio reserves the right to decline Yoga Teacher Training Certification to any student who does not fulfill course obligations & attendance or who does not meet the Yoga loft School's standards for certification.

Applicants will receive confirmation within 3 - 7 days of applying, whether they have been accepted to the teacher-training course.