



## Real Life Yoga Immersion

Qualification for 200-Hour Yoga Teacher Certification

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

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

Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

**Please tell us about your background with yoga:**

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**What would you like to learn most from our Real Life Yoga Immersion?**

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**What is your education and professional background outside of yoga?**

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**Please describe any special medical conditions? Are you taking medication?**

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**Where do you currently practice yoga? Which style(s) of yoga?**

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**What inspired you to pursue a deeper understanding of yoga?**

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**How did you hear about Peace through Yoga's Real Life Yoga Immersion?**

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**Why did you choose Peace through Yoga's Real Life Yoga Immersion?**

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**What are your goals after graduation?**

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**Please mail your application along with photo and your \$200 deposit:**

Peace through Yoga  
Attn: Mindi Epstein  
1032 Main Street  
Speedway, IN 46224

***Thank you!***