

**Yoga Life Society**  
**Meditation Teacher Training Application, 2021**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

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

E-mail \_\_\_\_\_

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Address \_\_\_\_\_

Did you graduate from a Yoga Teacher Training Program? \_\_\_\_\_

If so, When \_\_\_\_\_ What Level \_\_\_\_\_ Where \_\_\_\_\_

If you have not graduated from a Yoga Teacher Training Program,  
Please contact [shanti@yogalifesociety.com](mailto:shanti@yogalifesociety.com)

Have you read/studied the Yoga Sutras of Patanjali \_\_\_\_\_

How often do you meditate? \_\_\_\_\_

How long is a typical sitting \_\_\_\_\_

What meditation technique do you use \_\_\_\_\_

Do you include pranayama in your meditation sessions \_\_\_\_\_

Do you include chants, affirmations, or prayers in your meditation session \_\_\_\_\_

Which ones:

Are you currently teaching Hatha Yoga \_\_\_\_\_ If so, how often \_\_\_\_\_

Have you received initiation with (or are a disciple of) a master \_\_\_\_\_

If you received initiation, when was it \_\_\_\_\_

With who \_\_\_\_\_

Why do you wish to take this course you can use the back of the sheet, if needed):

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