



Yoga Teacher Training Program

Application Form

Please fill out this form and return it with your \$500 deposit to Blue Heron Wellness. Attach any additional pages as needed. Tuition balance is due before the program starts. Please contact us if you wish to discuss payment options.

Full Name: _____	I prefer to be called: _____	
Address: _____		
City: _____	State: _____	Zip: _____
Cell Phone: _____	Other Phone Number(s): _____	
E-mail address: _____		

Please answer the following questions:

What is your yoga experience? (Styles practiced? Years practicing? What draws you to yoga?)

What do you hope to gain from our program?

How did you hear about Blue Heron's Yoga Teacher Training Program? What appeals to you to this program?

Do you have any ailments or physical limitations we should be aware of?

Anything else you would like to share?

Refund Policy

The \$500 deposit is refundable minus a \$150 processing fee until the first day of the program. After the program starts, refunds will be considered only in the case of medical emergency or similar inability to continue in the program. Your signature and deposit indicate that you are committed to the program and that you understand these terms.

Signed _____ Date _____

Thank you for considering Blue Heron's Teacher Training Program.



Registered Yoga School