

HYM
Hot Yoga Methods
Teacher Training Application
33 Hidenwood Shopping Center
Newport News, VA 23606
757-223-9642

Personal Information

Full Name:
Street Address Apartment/Unit #
City State ZIP Code
Phone:
E-mail Address:
Birth Date:
How would you like your name to appear on your certificate?

Emergency Contact Information

Full Name:
Street Address Apartment/Unit #
City State ZIP Code
Phone:
Relationship:

A deposit of \$500.00 (non-refundable) is due immediately to hold your spot. Full amount must be paid before training starts.

I have read and understand the above terms and conditions

Signature: _____ Date: _____

Questionnaire

1. How did you become interested in teaching Yoga?
2. Are you currently teaching?
3. What are your goals for this training?
4. Where do you practice Yoga, and how often?
5. Do you have any injuries or physical conditions we should know about?
6. Are you interested in operating/owning your own Yoga business?
7. Would you be interested in teaching at Hot Yoga & Massage Studio?
8. How did you hear about us?