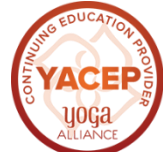




SWEAT HOT YOGA SOULFUL STUDIO



Join us to transform your mind, body, and life as an inspiring and extraordinary
Yoga Alliance power yoga teacher!

Please complete this form and submit to: info@sweathotyoganj.com or drop it to
the studio with a **\$500 dollar deposit.**

<u>NAME</u>
<u>ADDRESS</u>
<u>PHONE NUMBER</u>
<u>ALT. PHONE NUMBER</u>
<u>EMAIL</u>
<u>DOB</u>
<u>SEX</u>
<u>CURRENT OCCUPATION</u>
<u>EMERGENCY CONTACT (NAME, NUMBER)</u>

HEALTH

Please list all medical conditions, including epilepsy, diabetes, high blood pressure or any physical injuries?

Do you have any allergies? If so to what?

Are you under the care of a mental health professional (psychiatrist, psychologist) Please list any medications the professional has prescribed.

Have you undergone surgery within the past two years? If so what for?

Are you currently on any medications?

Are you pregnant?

Do you smoke? If so, how often?

How long have you been practicing yoga? What styles and where?

How often do you currently practice hot, warm, or non-heated yoga?

What yoga teacher inspires you?

Have you taken any other Yoga Teacher Trainings?

Fitness Trainings?

Are you currently teaching any group, yoga or exercise classes? If so where and for how long?

Are you willing to commit 100% to this training? If so, what will that look like for you?

Are you committed to attending every session?

Any questions or concerns?

