

Irish Yoga Association, P.O. Box 9969, Dublin 7.

Tel & Fax +353 (0)1 4929213 e-mail: [info@iya.ie](mailto:info@iya.ie)

## The IYA Teacher Training Course Application Form

Notes: **Please complete in Block letters** and

Return To: Irish Yoga Association, P.O. Box 9969, Dublin 7.

1)	Full Name:	
2)	Address:	
3)	Tel No. Home:	
4)	Tel No. Work:	
5)	Mobile Tel No:	
6)	Email Address:	
7)	Date Of Birth:	
8)	Occupation:	
9)	Qualifications:	
10)	No. of years practicing yoga?	
11)	Give name(s) of Teacher(s), dates you studied with them, location of classes:	
12)	Please list the details of Seminars attended:	
13)	List any books which have helped you in your practice:	
14)	How often do you practice and for how long?	
15)	Do you practice Breathing Techniques and/or Pranayama?	
16)	Please list experience or Qualifications in any of the following: Anatomy & Physiology, Human Biology, Physical Education, Movement & Dance, Medicine, Philosophy, Meditation or any other subject relevant to Yoga:	
17)	Please list experience or Qualifications in teaching (Including Yoga):	

18)	Please list Major Illnesses (including Psychological), Accidents and Operations, giving approximate dates and type of Treatment Received. Are you still receiving Treatment?:
19)	What has attracted you to the Irish Yoga Association Teacher Training Course?
20)	Express briefly (use a separate A4 page) your understanding and experience of Yoga and why you would like to teach it to other people. (The Committee would hope to use this for further discussion.):
Signature:	
Date:	
<i>All information given is treated responsibly and destroyed after you have finished our Course</i>	
<i>Website: <a href="http://www.iya.ie">http://www.iya.ie</a> Email: <a href="mailto:info@iya.ie">info@iya.ie</a></i>	