



Shanti Niketan Ashram

Application for the Prenatal Yoga Teacher Training



Name: _____

Phone: (_____) _____ - _____ Email: _____

Address: _____

List the teacher training programs you have completed.

Please describe a little of your relationship to the ashram and why you wish to study at the ashram.

Describe your yoga experience.

Please share your teaching experience.

Other education or training?

Why are you interested in this training and what are your expectations?

Do you have any physical limitations?

Any other comments?

If you require more space, please attach additional sheets of paper.
Kindly mail your completed application with your deposit or payment in full to:
Shanti Niketan Ashram, 1103 Imperial Rd, Cary NC 27511
Please email us with any questions: info@shantiniketanashram.com