



Pathways Yoga Systems

## TEACHERS TRAINING REGISTRATION FORM

### Level II

Please fill out and return with your registration fee of **\$600**

Make checks payable to **Pathways Yoga Systems**

Mail Registration and check to:

**Pathways Yoga Systems TTR**

**PO Box 843**

**Exeter, NH 03833**

NAME:

ADDRESS:

HOME PHONE:

WORK PHONE:

E-MAIL ADDRESS:

OCCUPATION:

*Please answer the following questions to help us guide you in your studies:*

1. What styles of yoga have you taken classes in?
2. Is there a specific style of yoga that you would like to teach in the future?  
Example: children's, therapeutic, power, etc?
3. What pranayamas are you currently working with in your personal practice?
4. Is meditation an important part of your yoga practices?
5. Is chanting something you would use in your personal practices?
6. Do you enjoy yoga philosophy or are you mainly interested in the asanas?

SIGNATURE:

DATE: