



Ashtanga Yoga Immersion 2020 Application Form

Name: _____

Address: _____

Phone Number: _____

Email: _____

Date of Birth: _____

Do you have a consistent Yoga Practice?

Do you have an Ashtanga Yoga Practice?

Where have you previously studied yoga/with whom?

Are you a yoga teacher?

Do you have any underlying injuries or health issues?

What are your aspirations for your yoga practice?

What you would like to attain from this course?

Email forms to info@ashtangayogaireland.ie