**Yin Yoga Teacher Training**

**Level 1 – Lower Body**

**Application Form**

Name………………………………………………………………………………………………………

(Name on Certificate) …………………………………………………………………………….

Address ……………………………………………………………………………………………………

………………………………………………………………………………………………………………..

Post Code ………………………………………………………………………………………………..

Phone (Home and Mobile) ………………………………………………………………………

Email ………………………………………………………………………………………………………

Date of Birth……….…………………………………………………………………………………..

**British Wheel of Yoga No. (if applicable)** ………………………………………………..

How long have you been practicing yoga?

Who is your current yoga teacher?

Are you currently a yoga teacher?

 If yes, how long have you been teaching?

Where did you complete your 200-hour teacher training?

How many yoga classes do you teach per week?

Have you trained in Anatomy or Meridian Theory before?

If yes, when and who with?

**Where and When**

**6 SATURDAYS WEEKENDS VIA ZOOM**

27th September 2025

11th and 25th October

8th, 22nd, and 29th November

9.00am – 17.00pm – one-hour lunch break plus two short breaks

**Included**

* Comprehensive Colour Training Manual
* 50 Hour British Wheel of Yoga Module Certification
* 50 Hour Yoga Alliance Professionals Certification
* Meridian Doll
* Meridian chart
* Writing materials
* 6 days of training and assessment

**Not included**

* Course books

**Pre-requisite reading**

As part of the course, you are required to purchase and read (if possible) before course starts the following books: -

* The 4 Foundations of Mindfulness by Bhante Henepola Gunaratana
* Insight Yoga by Sarah Powers

**Suggested Reading**

* The Complete Guide to Yin Yoga – Bernie Clark

**Payment**

Course fee is £695.

Early Bird Discount of £50 if deposit paid by 1st June 2025.

Balance payable by 24th August 2025.

A deposit of £150 is required with your application form to reserve your place. If booking less than 30 days before the course start date you must pay the full fee at time of booking.

Please make your payment by bank transfer payable to –

Mrs G Cawte

Sort Code 40 10 00

Acct No 51091395

HSBC

As a student of Gillian Cawte’s Yin Yoga Teacher Training, I consent to my contact details (name, email and phone number) being passed onto our partner, Yoga Alliance Professionals so they can contact me directly and invite me to register as a Trainee and Teacher. I understand that I have the option of opting out of this registration process.

I confirm that I have read the Terms and Conditions of booking and cancellation policy. I confirm that I am fit ad well and I am aware of no health issues that would prevent me from participating in this training.

Signature …………………………………………………….

Print Name …………………………………………………..

Date …………………………………………………………….

