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## Bewerbung zur Yogalehrer Weiterbildung

Course Location \_\_\_\_\_ Course Date \_\_\_\_\_ PHOTO  
Veranstaltungsort \_\_\_\_\_ Kursbeginn \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex(M/F) \_\_\_\_\_  
Name \_\_\_\_\_ Alter \_\_\_\_\_ Geschlecht \_\_\_\_\_

Address \_\_\_\_\_ email \_\_\_\_\_  
Adresse \_\_\_\_\_

City \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_  
Stadt \_\_\_\_\_ Land \_\_\_\_\_ Postleitzahl \_\_\_\_\_

Home Phone \_\_\_\_\_ Cellphone \_\_\_\_\_  
Telefonnummer \_\_\_\_\_ Mobilnummer \_\_\_\_\_

Occupation \_\_\_\_\_  
Beruf \_\_\_\_\_

Education/Skills \_\_\_\_\_  
Ausbildung/Fähigkeiten \_\_\_\_\_

Illnesses \_\_\_\_\_ Prescribed Medications \_\_\_\_\_  
Krankheiten \_\_\_\_\_ Verschriebene Medikamente \_\_\_\_\_

Children/Age of Children \_\_\_\_\_  
Kinder/Alter \_\_\_\_\_

Contact in case of Emergency \_\_\_\_\_  
Kontakt im Notfall \_\_\_\_\_

Address \_\_\_\_\_ email \_\_\_\_\_  
Adresse \_\_\_\_\_

Home Phone \_\_\_\_\_ Relationship \_\_\_\_\_  
Privatnummer \_\_\_\_\_ Beziehung \_\_\_\_\_

Length of practising yoga \_\_\_\_\_  
Eigene Yoga Praxis seit \_\_\_\_\_

Teachers you have been practising with (dates/name of teacher/yoga style) \_\_\_\_\_  
Lehrer, mit denen du gearbeitet hast (Zeiten/Name der Lehrer/Yogastil)

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Reason for wanting to attend the course \_\_\_\_\_  
Grund das Training zu absolvieren

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Reason for wanting to become a yoga teacher \_\_\_\_\_  
Grund Yogalehrer werden zu wollen

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Date \_\_\_\_\_ Signature \_\_\_\_\_  
Datum \_\_\_\_\_ Unterschrift \_\_\_\_\_