



YOGA ASSOCIATION OF GREATER DETROIT APPLICATION FOR MEMBERSHIP 2018

Instructions: Please complete this application and obtain the signature of a sponsor (any YAGD Registered Member in Good Standing). If you need additional space, please use the back of this form. Please hard copy mail the completed application to Karen Lutz, PO Box 7833, Bloomfield Hills, MI 48302, or you may email your completed application to cpkaren@me.com. Upon approval of your application, we will send you a membership welcome letter and additional YAGD information, including member access to our website.

Name _____ Cell Phone: _____
Address _____ Secondary Phone: _____
City, State, Zip _____ E-mail: _____

BRIEFLY DESCRIBE YOUR YOGA BACKGROUND

STUDENT EXPERIENCE: Include a summary of classes taken (with approximate dates), seminars, retreats, workshops attended, books studied, and any other experiences you consider relevant to your growth as a student of yoga.

TEACHER TRAINING: Formal training, apprenticeships, certifications, etc. *Please note any RYT designation. Students are welcome to apply to YAGD. IF YOU DO NOT TEACH, PLEASE INITIAL:* _____
Do you have intentions of taking teacher training? Yes ___ No ___

TEACHING EXPERIENCE:

Type of Classes: (Examples: Hatha, Ashtanga, Yin, Chair, Kundalini, Meditation)

YAGD acknowledges all forms of yoga.

Where have you taught? Approximate dates:

Are you currently teaching? Where?

Yoga Teachers/teachers in training only: If not currently teaching, discuss your goals regarding teaching:

What do you hope to gain from YAGD membership?

What kinds of contributions do you feel you can make to this organization?

Applicant's Signature _____ Sponsor's Signature _____

Month & Day of Birth

Date of Application

Date of Approval by Steering Committee