



Enrollment Form

Date: January 4th – May 4th, 2025

Time: Varies

Location: Studio Y

(Please print clearly and email back to chaneljaramillo@gmail.com)

Name: _____

DOB: _____

Address: _____

Phone: _____ Cell: _____

Email: _____

Occupation: _____

Emergency Contact: _____

Relationship/Phone: _____

Name you would like on the certificate:

What is or has your experience been with Yoga?

What is your experience with or understanding level of human anatomy? _____

How do you plan to use YTT in your personal or professional life?

What do you want or hope to learn in this 200-hour certification course?

Circle Method of payment: Credit Card VENMO Cash Payment Plan

An invoice will be emailed for cc and payment plan options from Transpersonal Health, LLC. Please check your spam.
Forms and payment must be received one week before the training date. If on a payment plan, payment must be received 24 hours before the weekend training you are attending.