

**APPLYING TO:**

\_\_\_\_\_ MODULE 1      \_\_\_\_\_ MODULE 2  
(Prerequisite Module 1)

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE:      Home: \_\_\_\_\_

                Business: \_\_\_\_\_

                Cell: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

WEBSITE: \_\_\_\_\_

**BACKGROUND:**

Please describe other training - ie., yoga, pilates, aerobics, personal training, other (please describe).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you currently teaching? Describe types of classes being taught.

\_\_\_\_\_  
\_\_\_\_\_

Do you have running experience? Yes - Please describe. No - please describe complementary background.

\_\_\_\_\_  
\_\_\_\_\_

What geographic area do you plan to market Christine Felstead's Yoga for Runners™ workshop?

\_\_\_\_\_  
\_\_\_\_\_

Mail completed registration form and \$200 deposit, cheque payable to Christine Felstead, to:

Christine Felstead  
6 Archgate Lane  
Toronto, Ontario  
M6E 5B1