



Let Your Yoga Dance® Teachers Association Registration

Name

Address

City, ST, Zip

Prov/
Country

Tel:

HOME:

CELL:

Email:

Date

Graduated

Tribe Name:
not required

Are you
currently
teaching?"

LOG IN INFORMATION:

Log in
name:

Password:

TEACHERS DIRECTORY ~ (also to be listed on www.letyouryogadance.com) Do you want to be listed in the Teachers Directory? You do not have to have an ongoing class to be listed here. If yes, please complete the following:

Name:

Address: Optional

Revised 12/5/14

www.letyouryogadance.com



Let Your Yoga Dance® Teachers Association Registration

City/State/Zip/
Province/Country

Contact Info: phone,
email, website

Special Info: If you
offer specialized
classes.
