



WELCOME HOME
yoga & wellness

BE A LIGHT SCHOLARSHIP APPLICATION FORM

Director of Programming: Robyn Childers, E-RYT 800, YACEP

Please download, print, complete & scan form.

Email to: info@welcomehomeyoga.com

Name: _____

Date of Birth: _____

Phone: _____

Email: _____

Address:

City: _____ State: _____ Zip: _____

1) Have you ever practiced yoga? If yes, tell us about your practice and experience?

2) Do you have any injuries, physical or medical challenges? If so, describe.

3) In an attempt to support people who have typically been marginalized or excluded, or have not had access to yoga or other healing modalities, please share if you identify as coming from one of these groups. (i.e., BIPOCs, LGBTQ+, Veterans, persons with a physical, emotional or financial disability, persons seeking recovery from addiction and/or trauma affliction, etc.)

BE A LIGHT RECIPIENT APPLICATION FORM continued...

4) Are you experiencing any financial or personal hardships that you would like us to consider?

5) Are you willing to attend a minimum of 2 yoga classes per week over the course of the award period?

Yes ___ No ___

6) Are you willing to participate and volunteer in at least one Karma Yoga community event during the year of your scholarship, if awarded? At Welcome Home Yoga & Wellness, we believe you can only keep what you have by giving it away.

Yes ___ No ___

7) Are you interested in becoming a Yoga teacher?

Yes ___ No ___

8) Any additional comments or information you would like to share with us?
