**SpainBcn-Programs in Barcelona**SpainBcn.comhttps://www.facebook.com/SpainBcnStaffTrainingWeek

**Application form – Yoga and Meditation for Educators**

| **Name and surname** |  |
| --- | --- |
| **Institution** |  |
| **Unit / Department at home Institution** |  |
| **E-mail** |  |
| **Telephone** |  |
| **Address / City / Postcode** |  |
| * **Level of Yoga**
 |  |
| **Date Course** |  |

Please send this form

course in 2024**stafftraininginscription2024@gmail.com**

Subject: Staff Training Week + your name and last name