



**The Cycle Revolution Teacher Training**  
**Application Form**

Please fill out the application questions below and send back via email to [casey@spynga.com](mailto:casey@spynga.com)

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone: (H): \_\_\_\_\_ (W) \_\_\_\_\_ (Cell) \_\_\_\_\_  
Email: \_\_\_\_\_  
Present Occupation: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_

**Application Questions:**

1. Please give a short description of your indoor cycling journey (include details of your practice like duration/time, time off from practicing, styles, etc.) and what has shaped your experience (teachers/life/inspiration)
2. Why are you interested in taking the Teacher Training Program?
3. List your past indoor cycling instructors and/or experiences, including:
  - Classes + Workshops taken. Please be specific including details on where you took them + the instructors' names.
4. What are your interests outside of Indoor cycling?
5. Please describe any injuries or medical conditions that may be a consideration in this forum of training.

**In addition to this application, you are required to take at least 1 class with Casey Soer, if you have not done so. Please let her know prior to class that you have submitted your application for the cycle revolution teacher training and this is the required class in the application process.**