



The Center for Pranic Healing, Inc.

420 Valley Brook Avenue Lyndhurst, New Jersey 07071
Toll Free (877) 787-3792 Telephone (201) 896-8500 Fax (201) 896-8501
www.pranichealingusa.com – pranichealingusa@gmail.com

Please
Place your
Picture
here

ARHATIC YOGA LEVEL 3 APPLICATION FORM

PLEASE PRINT

Name: Mr./Ms./Mrs. _____ Birth Date: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Tel (Home): _____ (Cell): _____ E-Mail: _____

Date Arhatic Yoga Preparatory Level was Taken: _____ Location: _____ Instructor: _____

Date Arhatic Yoga Level 1-2 was Taken: _____ Location: _____ Instructor: _____

For your safety, please answer the following questions:

- 1) Do you smoke? Yes Rarely No
- 2) Do you take drugs? Yes Rarely No
- 3) Do you drink alcoholic beverages? Yes Rarely No
- 4) What is your diet? Vegetarian Non-Vegetarian
- 5) Have you been diagnosed or had history of contagious diseases or other illnesses? Yes No
If yes, please specify: _____

-
- 6) Do you have history or present serious physical or psychological disorders? Yes No
If yes, please specify: _____
-

Five Pillars of Arhatic Yoga

Please print legibly and be sure to complete all the questions listed below in full honesty.

1. What is your attitude toward the Supreme God?

2. What is your attitude toward the Guru or Spiritual Teacher, Grand Master Choa Kok Sui?



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3. Purification: How often do you practice physical exercises and the breathing techniques?

4. How often do you practice the following meditations?

- a) Kundalini Meditation: _____
- b) Arhatic Dhyana: _____
- c) Meditation on the Blue Pearl: _____
- d) Meditation on Twin Hearts: _____
- e) Lord's Prayer: _____

5. How many times a week do you do service?

6. How often do you tithe?

7. To whom do you tithe?



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8. What books have you read/studied that are related to your spiritual practice and to the advancement of Pranic Healing?

Signature:

Date:

You must be practicing Arhatic Yoga Level 1-2 for a minimum of 3 years. Your application will be evaluated and screened for acceptance to Level 3. Please send this application via email to pranichealingusa@gmail.com or via fax (201) 896-8501. You will be notified of the status of your application.