

# Enrollment Form for **Pilates** Courses

## Enrollment Form

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Business Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Course for which you are registering:**

\_\_\_\_\_

**Email:** \_\_\_\_\_

There is an entrance requirement of 20 hours of previous Pilates study in private study, group mat or equipment classes with a certified instructor (i.e. not by videotape). Please list how you have fulfilled this requirement and who were your instructor(s). We may contact your instructor(s) to clarify his/her own training so please include the name of the studio(s) or gym(s) where the training took place. Attach additional sheets as necessary.

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Please tell us of your movement background and related career experience.

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Please mail completed form to Pacific Movement Center at 1535 Seabright Avenue, Suite 210, Santa Cruz, California 95062 - or - e-mail the relevant information to [register@pacificmovementcenter.com](mailto:register@pacificmovementcenter.com)

- The course will be held with a minimum of two students and a maximum of six students. You can arrange for private training by paying the pre-trainers private rate.
- In case of cancellation on the part of the studio to not meet the minimum number of students, the deposit will be refunded.
- I realize that the course may be physically or emotionally challenging and I accept full responsibility for taking part in the course. There is nothing I am aware of that would hinder my participation in this course.