

YogaWorks Pilates Teacher Training Application

REGISTRATION

date(s):_____

REGISTRATION	
Name:	
Initials or credits as you wan	t them to appear on your certificate:
Address:	
City:	State:Zip:
Phone:	Email:
Course Enrollment Date:	
\$500 non-refundable \$3,500 balance due	s not include the cost of required reading materials) e deposit due at time of application to reserve a space at start of program embership (optional, but recommended)
Method Of Payment: Check: Please make payab	le to Yogaworks and include DL#; Credit Card: (Visa, MasterCard, American Express)
CC No	
Billing Zip:	I hereby authorize payment of \$
Signature:	· · · · · · · · · · · · · · · · · · ·
STUDENT CONTRACT	
 toward a future Yoga If notice of cancellat deposit but my rema Once the program b 	cancel 14 days prior to the start of the training, my \$500 deposit may be transferred aWorks teacher training and I will be refunded the remaining balance. ion is received less than 14 days prior to the start of the training, I will forfeit my \$500 mining balance will be refunded. egins, tuition is non refundable and non-transferable. No exceptions.
Pilates History: Do you have any current Pila	(Initial) ates experience? YN
If yes, circle the leve	el that applies: Instructor Student
With whom did you study?	
Teacher Training. If you are Pilates session with a Yoga\	s of Pilates Training (classes or privates) before the start of the YogaWorks Pilates not a Pilates instructor, we require you to take at least one private and one group Works Pilates Teacher Trainer prior to the start of the training. t one private Pilates sessions with a YogaWorks Pilates Instructor? Y N nd

Instructor name(s) and date(s):
I agree to fulfill this requirement:
What is your current state of health? Excellent Good Fair Some Challenges (briefly describe)
Have you had surgery in the past year or do you have any medical conditions or injuries that may affect your ability to fully participate in the training? Y N (if yes, explain)
Please tell us about yourself including any prior teaching experience and why you would like to become certified in Pilates.
Have you taken any other courses that are related to health and fitness? If so, explain.
Required Materials The following book must be purchased prior to the start of the Teacher Training course. The cost of the reading materials below is not included in the program. Pilates Anatomy, Rael Isacowitz, Karen S. Clippinger - Amazon.com Concise Book of the Moving Body, Chris Jarmey, contributor Thomas Myers - Amazon.com A Pilates Primer: The Millennium Edition, by Joseph H. Pilates and Judd Robbins - Amazon.com PMA Pilates Certification Exam Study Guide, Pilates Method Alliance - PilatesMethodAlliance.org
Suggested Reading Materials Muscles: Testing and Function with Posture, by Kendall, McCreary, and Provance - Amazon.com The Pilates Body, by Brooke Siler - Amazon.com The Anatomy Coloring Book, by Kapit and Elson - Amazon.com
I attest all of the information herein to be true and I agree to the requirements and terms set forth by the YogaWorks Pilates Teacher Training Program.
(Signature) (Date)
Application Check List: Agreement to complete of at least one private and one group lesson with a YogaWorks Pilates Teacher Your completed Registration Form Your signed Student Contract Your \$500 deposit or payment in full Mail, fax, or deliver the application to: YogaWorks, Pilates Teacher Training, 230 Newport Center Dr. #230, Newport Beach, CA 92660

For more information please contact pilatesTTnb@yogaworks.com.