



## Matwork Teacher Training Course Enrolment Form

I hereby agree that a non-refundable sum of R2500.00 is payable immediately upon confirmation of a place; and that my place is not secured until this amount is paid.

**Balance of payment shall be made as set out in the Schedule of Fees.**

Mr      Mrs      Ms	Name:
Address:	
	Postcode:
Tel :	Cell:
Email:	
Date of Birth:	Start Date of Course:

Please tick if taking advantage of the advance payment option

Do you currently attend classes with a Body Control Pilates teacher? If so, with whom and for how long?	
Please give details of any other Pilates experience:	
Please give details of other qualifications or relevant experience:	
What is your main reason for training to be a Body Control Pilates teacher?	
How did you first hear about the Body Control Pilates training courses?	
Please list any injuries or health problems (particularly related to neck, back and spine) that you currently have, or have had, which may affect your physical ability to complete the course successfully.	

Signed in Agreement:

Date:

Please return your completed and signed form to [education@bodycontrolpilates.co.za](mailto:education@bodycontrolpilates.co.za)

All information will be treated in the strictest of confidence.