

BACK IN MOTION PILATES COURSE REGISTRATION FORM

Participant Details *(Print Clearly):*

First Name: _____

Last Name: _____

Postal Address: _____

Phone Number: (hm) _____ (wk / mob) _____

Email: _____

Course information will be sent to you prior to the courses, please select:

Information sent via post Information sent via email

Course Details *(please Tick):*

Course	Venue	Date	Payment Due	
Level I Mat	Auckland	27 th & 28 th Feb	(17 th Jan)	<input type="checkbox"/>
Level I Mat	Dunedin	17 th & 18 th April	(27 th Mar)	<input type="checkbox"/>
Level II Mat	Auckland	12 th & 13 th June	(12 th May)	<input type="checkbox"/>
Level II Mat	Dunedin	17 th & 18 th July	(17 th June)	<input type="checkbox"/>
Level III Mat	Auckland	21 st & 22nd August	(21 st May)	<input type="checkbox"/>
Machine course	Auckland	30 th & 31st Oct	(30 th Sept)	<input type="checkbox"/>
Certification	(Correspondence)	30 th Nov	(30 th Nov)	<input type="checkbox"/>

Payment Details *(please Tick):*

\$650 Per Course \$200 Certification Other *(specify)* _____

\$1740 Combination Rate for mat courses, does not include machine courses

(Paid in full 4 weeks prior to first course)

Payment Options:

Cheque (Payable to **Back In Motion Pilates Ltd.**) Visa MasterCard

Card Number:

Name on Card _____ Expiry Date: _____

Signature _____ Date: _____

In order to register, payment must accompany the registration form and be received 4 weeks prior to the course. Cancellation fees apply.