



CERTIFICATION APPLICATION for New Students

CONTACT INFORMATION

NAME: _____ COMPANY NAME (if applicable): _____

ADDRESS: _____ CITY: _____ PROVINCE: _____ CODE: _____

PHONE: HOME _____ ALT _____ EMAIL _____

PLEASE INDICATE THE COURSE YOU ARE APPLYING FOR:

COMPREHENSIVE PROGRAM OPTIONS:			
<input type="checkbox"/>	CMR‡- Comprehensive Matwork & Reformer - 90 hrs + apprenticeship	\$ 2350.00	
INTENSIVE PROGRAM OPTIONS:			
<input type="checkbox"/>	IMP - Intensive Mat Plus™ - 40 hrs	\$ 1125.00	<input type="checkbox"/> ICAD -- Intensive Cadillac - 25 hrs \$ 950.00
<input type="checkbox"/>	IR - Intensive Reformer - 50 hrs	\$ 1800.00	<input type="checkbox"/> ICHR - Intensive Stability Chair - 15 hrs \$ 600.00
<input type="checkbox"/>	IBRL - Intensive Barrels - 10 hrs	\$ 425.00	
ADVANCED PROGRAM OPTIONS			
<input type="checkbox"/>	AM- Advanced Matwork - 6 hrs	\$ 250.00	<input type="checkbox"/> ACAD - Advanced Cadillac \$ 250.00
<input type="checkbox"/>	AR - Advanced Reformer - 18 hrs	\$ 725.00	<input type="checkbox"/> ACHR - Advanced Chair \$ 175.00
			<input type="checkbox"/> ABRL - Advanced Barrels \$ 175.00
SPECIALTY PROGRAM OPTIONS:			
<input type="checkbox"/>	FA - Functional Anatomy - 30 hrs ‡Mandatory for CMR course participation	\$ 650.00	<input type="checkbox"/> ISP - Injuries and Special Populations 24 hrs \$ 1250.00
GROUP SPX PROGRAM OPTIONS:			
<input type="checkbox"/>	GM - Group SPX Mat-Plus - 40 hrs	\$ 1125.00	<input type="checkbox"/> GR - Group SPX Reformer - 50 hours \$ 1825.00
<input type="checkbox"/>	XMG - Crossover IMP to GM - 6 hrs	\$ 250.00	<input type="checkbox"/> XRG - Crossover IR to GR - 6 hrs \$ 275.00
<input type="checkbox"/>	XMP - Crossover GM to IMP - 10 hrs	\$ 400.00	<input type="checkbox"/> XRP - Crossover GR to IR - 10 hrs \$ 400.00

All course hours must be attended in order to complete the course.
Fees for course materials are in addition to course fees.

DATE(S) YOU ARE APPLYING FOR: _____

I will require course materials: Yes No (please circle one)

Course Registration

A deposit is required upon submission of your application to our programs to hold your spot and cover administrative costs. The deposit for your initial application is \$310.00 plus GST. This deposit is non-refundable but is transferred towards the cost of your first certification examination provided your exam is booked within six months of your course completion date.

All course fees are due in full two weeks before the start date of your course. There are no refunds for withdrawals within the two weeks prior to the start of the course. All course fees are subject to change without notice. A travel surcharge will be added to courses hosted outside of Calgary. Please contact us for details.

MasterCard Visa Cheque - Payable to Calgary Pilates

Card # _____ Exp _____

SUB TOTAL: \$ _____ x 1.05 GST = TOTAL OWINGS \$ _____

Name on card _____ Signature* _____

*By signing the application, I agree to the above charges.

A STOTT PILATES® Licensed Training Centre since 2003
Mission Square Suite 200 | 2424 4th Street SW | Calgary, AB | T2S 2T4
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RELEVANT EDUCATION (Please attach additional sheet or resume if required)

Please list related degrees, diplomas, post-secondary or certificate courses and workshops:

Describe anatomy education (musculoskeletal/biomechanics); include number of hours, where and when you studied (college, university, workshop)

List related certification (e.g. ACE, AFLCA etc. please specify)

RELEVANT EXPERIENCE

Outline your teaching experience (subject taught/years teaching)

Describe your experience in dance, fitness or other body work fields

Outline your experience with the works of Joseph Pilates none 1-10 hrs 10-30 hrs +30 hrs
(STOTT PILATES® or other _____)

PERSONAL INFORMATION

Do you have any injuries (including current or recent pregnancy) or postural issues that may affect your performance during the course?

How did you hear about STOTT PILATES® and Calgary Pilates?

Why are you interested in becoming a certified instructor? How will you use your knowledge?

I hereby certify that the information provided on this application is accurate.
I understand that failure to provide accurate information may result in my removal from the certification program.
I have included the following:

- 20% non-refundable/non-transferable course fee deposit or \$310 application/administration fee
- 2 letters of reference which reflect pre-requisites, character, inter-personal skills, and/or any teaching abilities
- CV of education/experience

Applications that do not include the above will not be processed.

Signature* _____

*By signing the application, I agree to the above conditions.