

## APPLICATION FORM

### Course Details

<b>Course</b>	Advanced Dip Pilates	Diploma Pilates	Cert IV Pilates Matwork
<b>State</b>	NSW	QLD	VIC

### Contact Details

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

Postal Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Home # \_\_\_\_\_ Mobile # \_\_\_\_\_

Email \_\_\_\_\_ DOB: \_\_\_\_\_

### Pre-requisite for Entry

I hold a DIPLOMA OF PROFESSIONAL PILATES INSTRUCTION (91491NSW)

From the training organization: \_\_\_\_\_

I believe I hold equivalent training to the Diploma of Professional Pilates Instruction (91491NSW) and understand that I will be required to provide sufficient evidence to support this claim.

### Background & Experience

I have already attended \_\_\_\_\_ (number of pilates sessions) as a client, at \_\_\_\_\_

\_\_\_\_\_.  
\_\_\_\_\_. (Studio/s). Of these, \_\_\_\_\_ (number of sessions) have been Matwork classes, and \_\_\_\_\_ (number of sessions) have been Studio sessions.

Are you currently teaching Pilates? **Please circle** Yes I have taught for \_\_\_\_\_ months / years

No

If yes, what is the name of your current employer/Studio? \_\_\_\_\_

### Outline of Current education and work experience (please attach brief resume):

Highest Educational Level completed: **Please circle** ♦University ♦TAFE ♦Yr 12 ♦Yr 11 ♦other

Qualifications \_\_\_\_\_

Current employment \_\_\_\_\_

Is this position: **Please circle** ♦Full Time ♦Part Time ♦Self Employed ♦Student

Are you? **Please tick** Aboriginal  Torres Strait Islander  Neither

Country of Birth \_\_\_\_\_

Do you speak a language other than English at home? **Please tick** No  Yes

I speak \_\_\_\_\_

Proficiency in spoken English: **Please tick** Very well  Well  Not Well  Not at all

Do you have any conditions that may affect your ability to participate in the Course? **Please tick**

<input type="checkbox"/> None	<input type="checkbox"/> Hearing/deaf	<input type="checkbox"/> Physical	<input type="checkbox"/> Intellectual	<input type="checkbox"/> Learning
	<input type="checkbox"/> Vision	<input type="checkbox"/> Mental Illness	<input type="checkbox"/> Medical condition	<input type="checkbox"/> Other

Details \_\_\_\_\_

### **Payment Details**

I wish to pay my application fee of \$60.00 by:

Cheque/Money Order: **Please make payable to Pilates International Pty Ltd**

Credit Card **Please tick one**  Visa  Mastercard

Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Expiry \_\_ / \_\_ CCV# \_\_\_\_\_

Name on Card: \_\_\_\_\_

Card Holders Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **TERMS AND CONDITIONS**

- 1 If insufficient enrolments are obtained, Pilates International Pty Ltd reserves the right to cancel or postpone courses at short notice. If cancellation occurs by Pilates International, course fees will be refunded in full.
- 2 All cancellations must be received in writing 14 working days prior to the course commencement. A \$100.00 administration fee would be applied in this instance. Failure to attend the course without written notification prior to course commencement will result in full fees being charged.
- 3 Payment in full must be received 21 days prior to the commencement of the course.
- 4 No refunds will be given once the course has commenced.

### **CHECK LIST**

Send this completed application form to register your interest for enrolment in training with Pilates International Training Centre. **Please ensure the following are included with your application form:-**

- Cheque/Money order or credit card details for \$60.00 application fee;
- Brief Resume detailing educational experience and work experience, including references from employers and/or industry colleagues in verification of your experience;
- Certified copies of Certificate of Membership to Pilates Industry regulatory body APMA or PAA (if applicable);
- Certified copy of Diploma Pilates qualification; OR justification of equivalency

If any of the above is unclear, please contact Student Enrolments by telephone (02) 9281 1144. Please return your documents (making sure you have included all the check list items) to:

Student Enrolments  
Pilates International Training Centre

Via email: [info@pilatesitc.com](mailto:info@pilatesitc.com)

By Post: PO Box 416  
BROADWAY NSW 2007

