



124 East 40<sup>th</sup> Street  
Suite 603  
New York, NY 10016  
www.smartworkout.net  
smartworkout@verizon.net  
Phone 212.661.1660  
FAX 212.661.1880

## Pilates Reformer Certification Course Application

Mail your application to:  
**Smart Workout** 124 East 40<sup>th</sup> Street, Room 603, New York, NY 10016 or Fax: 212-661-1880

### Contact Information please print

Name:

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Address:

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City:

prov. / state:

country:

postal / zip code:

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Business phone:

Home phone:

Cell:

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E-mail

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### Course Registration

Applications must be accompanied by a detailed resume / CV outlining relevant education and experience, two letters of references, and a \$400 deposit. Our courses are limited to a maximum of six people, and applications will be processed on a first-come-first-served basis.

**Space will ONLY be reserved upon the receipt of all application materials and deposit.**

Fees for courses do not include required course materials or applicable exam fees. Course fees are due two weeks

before course start date. **Deposits and course fees, with limited exception, are non-refundable, and non-transferable.**

Check our website for full details on our refund and cancellation policies.

### Start Date Requested

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Course application (cont'd)

## Payment Method

deposit only    full payment    MasterCard    VISA    AMEX    check    money order

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account number:

exp:

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name on card:

signature:

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## Reference Letters

Letters should reflect course prerequisites, your teaching abilities and character

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## Relevant Education

Please list related degrees, diplomas, postsecondary or certificate courses and workshops

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Describe anatomy education: Include number of hours, when / where you studied and what topics were covered (e.g. musculoskeletal, anatomy, biomechanics)    college / university course    workshop / other

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List related certification (please specify: e.g. ACE, AFAA)

Course application (cont'd)

## Relevant Experience

Outline your teaching experience (describe subject taught / years teaching)

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Describe your personal experience in dance, yoga, fitness or other body work (how many years / how recently)

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Outline your pilates experience (describe who you've studied with, when, & where, and for how long)

Indicate Smart Workout, or other.       none     1-10 hrs     10-30 hrs     30+ hrs

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## Personal Information

Do you have any injuries, (**including current or recent pregnancy**) or postural issues?

Failure to disclose any injuries, conditions or postural issues prior to enrollment may result in your removal from the course or the modification of course repertoire for you individually. Please note that we cannot accept applicants who are currently pregnant.

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Course application (cont'd)

How did you hear about Smart Workout and its education program?

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What are your personal goals which this program could help you achieve? Are you interested in becoming a pilates instructor? If so, why?

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Are you using this course to fulfill continuing education credits?  Yes  No If so, for what organization?

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Are you applying for the workshop-only portion of our program?  Yes  No

Are you applying for full certification?  Yes  No

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:

- \$400 course fee deposit
- Two letters of reference
- Detailed resume / CV of education / experience

Applications that do not include the above will not be processed

Signature:

date:

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