

VF STUDIO

The pilates professionals



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Teacher's Training Program Certified by **PHYSICALMIND INSTITUTE**

Name: _____ IC No: _____

Occupation: _____ Present Employer: _____

Address: _____

Contact No.: _____ Email: _____

Please register me for the selected course/ courses:

COURSE	DATE OF COURSE	FEES	Please tick relevant
Initiation 101 – Matwork Course	Sep 26-28 '08 (Circle Relevant)	S\$680	
Initiation 201 – Standing Pilates	Aug 22-24 '08 OR Oct 17-19 '08 (Circle Relevant)	S\$680	
Concentration 101 – Pilates Apparatus	Oct 4,5,11,12, Nov 1,2,8,9,15,16 '08	S\$4180	
TOTAL FEES			

To get full benefit of learning experience, please read the class notes for a good understanding of how the Fundamentals relate to the Pilates exercises. You must show an ability to perform the exercises with proper form and alignment, as well as, an understanding and knowledge of terminology from the handout and reading assignments.

Please indicate if you have fulfilled the prerequisite for the selected course:

Institution/ School/ Studio/ Equivalent	Date (mm/yy)	Teacher

Terms & Condition

- Registration closes 14 days prior to commencement of course
- Course commencement subject to minimum of 4 pax, if insufficient headcount, it will be postponed to the next intake.
- Course fees subject to be adjusted due to freight charges at the Studio's discretion.

Cancellation Policy

- 30 days prior to course date: full refund of tuition
- 30 – 7 days prior to course date: S\$110
- Less than 7 days prior to course date: S\$210
- No Refunds or Rescheduling after the start of the course

RESCHEDULING IS ALLOWED ONLY ONCE. Materials are non-refundable when canceling. Deadline for registration is 30 days prior to the start of the course. Any registration afterwards must be made by credit card only.

I have read and agree with Terms & Condition and Cancellation Policy stated above _____

<u>For Official Use</u>	
Payment Mode: <input type="checkbox"/> Check # _____	<input type="checkbox"/> Cash
Charge my: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Amex	Exp. Date: ____/____
Credit Card No. _____	