

CLASSES FOR THERAPEUTIC BODYWORK PROGRAM

This is the class list form, which must be filled out and submitted with your enrollment materials.

• Please write in each class name in full and the date it meets; this will reserve a seat for you.

	Class Name in Full	Date I Will Take This Class	Date of Lab (or <i>no lab</i> if appropriate)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.	FINAL EXAM		no lab

Housing Accommodations Needed Yes / No (please circle)

I am aware that if I fail to give 14-day written notice that I will be absent, I must pay a \$100 fee to attend the class at a later date. I also understand that I must register at least two days in advance f any class.	for

Signature

Note: Registration will not be accepted on the day that class begins.

Print name

Therapeutic Bodywork Practitioner candidates may select the color of massage table/accessories.				
Please circle one color choice: Table and accessories: agate (blue) / teal (green) / burgundy / black / mushroom / buff / purple				
Other colors are available, but may not be in stock for immediate shipment – refer to the enclosed flyer.				

Date