



**APPLICATION FORM  
PILATES TEACHER TRAINING DIPLOM PROGRAM**

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First Name

Last Name

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Street Address

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City

State /Province

ZIP/Postal Code

Country

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Phone

Email

Describe your Pilates experience:

How did you hear about our Teacher Training Program?

**Prior Pilates Experience**

Instructor's Name:

Studio Name:

Length of time at this studio:

How many times/week do you work out?

What are the main concepts emphasized in your sessions:

Which apparatus do you have experience teaching?

Reformer  Mat  Cadillac  Pole  Chair  Barrels

Describe your movement/athletic history:

Questions? Call Matilda at 604-328-2065 or email her at [mchristensen@shaw.ca](mailto:mchristensen@shaw.ca)

Submit your application form with a \$157.50 non-refundable fee (includes application fee and entrance evaluation fee) via e-transfer or cheque to Pilates from the Center, attn: Matilda Christensen, 157 East 1<sup>st</sup> St., North Vancouver, BC V7L 1B2 or by email to [pilatesfromthecenter@me.com](mailto:pilatesfromthecenter@me.com)