



CERTIFICATION EDUCATION APPLICATION

E-mail application to: Center Pose, Inc. d/b/a Pilates South Texas, 1934 West Gray, Suite 211, Houston, Texas , 77019
T: 1.888.838.3664, ext. 2 F: 1.858.429.5869 E-mail: info@pilatessouthtexas.com Website: http://www.pilatessouthtexas.com

First Name: Last Name:
Address:
City: State: Zip Code:
Phone: E-Mail:
Referral(s): Pilates South Texas Website Merrithew™ Website or Social Media or Friend | Colleague

Physical participation is required. Any physical concerns acquired during the education that impede physical participation will not exempt student from completing all required hours.
- List any injuries, conditions or postural concerns that you know may limit your performances during the education [Medical clearance submission with application as required].

Table with 2 columns: STOTT PILATES® Education: INTENSIVE PROGRAMS (Level 1) and STOTT PILATES® Education: ADVANCED PROGRAMS (Level 2). Rows include IMP, IR, ICCB, ICAD, ICHR, IBRL, ISB, AM, AR, ACCB, ACAD, ACHR, ABRL, and ISP.

STOTT PILATES® CERTIFICATION EXAM: Achieve internationally recognized STOTT PILATES® Certification
Proposed Practical Exam Date: Proposed Written Exam Date:

Select Repertoire: Mat Reformer Mat & Reformer Mat, Reformer, Cadillac, Chair & Barrels
Select Level of Exam: Level 1 Level 2 Level 1 & 2

ADDITIONAL RESOURCES To Prepare for the STOTT PILATES® CERTIFICATION EXAM

Weekly or Bi-Weekly Guided Coverage: (Virtual or In-Studio Appointment - 30 minutes)
Written 'Mock' Exam: (In-Studio Appointment - 2 hours)
Practical 'Mock' Exam: (Virtual or In-Studio Appointment - 1 1/2 to 2 1/2 hours)

KINETIC CHAIN® Education: Supplement instruction & programming with current education created by Center Pose, Inc.
Education Date:

Table with 3 columns: KINETIC CHAIN® Training, KINETIC CHAIN® Suspension, KINETIC CHAIN® Sports Motion. Rows include C.O.R.E. Principles & Workout and Anatomy & C.O.R.E. Principles.

EXPERIENCE

Self-Practice [Mat, Reformer, Cadillac, Chair or Barrels] None 10-30 hours 6 months 1 year+ Method & Location
Fitness Instruction and/or Coaching Experience & Duration: [Pilates, yoga, group fitness, personal trainer or none]

It is my first STOTT PILATES® Education Training [Submit the following]
It is Not my first STOTT PILATES® Education Training [Submit the following]
Letter of Completion of Intensive Course, [IMP, IR, ICAD, ICHR or IBRL] is required to register for another Intensive or Advanced Course [AM, AR, ACAD, ACHR or ABRL] or ISP

I will pick-up course materials before start date I will pay a shipping fee for course materials delivery I will wait to receive course materials on start date

PAYMENT INFORMATION

Amount: Check [payable to Center Pose, Inc.] or Visa MasterCard American Express
Credit Card #: Expire Date: CVC Code:
Name on Credit Card: Signature: Date:

My signature authorizes Center Pose, Inc., d/b/a Pilates South Texas to charge the above Credit Card for the payment indicated above.

REFUND POLICIES FOR ALL EDUCATION: Refund(s) will be processed in full payment if the registered education is not conducted.