



Level 4 Certificate in Instructing Applied Pilates Matwork Registration Form for Level 3 Pilates Teachers

☐ Mr ☐ Mrs ☐ Ms		
Name:	Date of Birth:	
Address:	Telephone (Mobile):	
	Telephone (Mainline):	
	Email:	
Postcode:		
Please give details of your Level 3 Pilates Qualification (Date & Awarding Organisation)		
Please give details of your Special Population qualifications, if any (Date & Awarding Organisation)		
Please attach copies of certificates when returning this form.		
Which Special Populations categories do you want to include towards your Level 4 Pilates qualification?		
Bone Health Children's		
Older Person Pregnancy		



I hereby agree to attend the three mandatory courses and my designated Special Populations courses within 18 months of registering for the Level 4 qualification, and take all assessments within two years of registration. Should extenuating circumstances occur, I will notify Body Control Pilates to discuss possible deadline extensions. I understand that the £100 Registration Fee is non-refundable.

Signature:	Date:
FOR OFFICE USE ONLY:	
Level 4 Pilates Pass (£1,125, value £1,500)	Date Paid:
Registration Fee (£100)	Date Paid:
COURSES ATTENDING:	
Procision of Movement (Course Data):	

Please email your completed and signed form, along with copies of certificates, to:

Amanda Ffitch (amanda.f@bodycontrol.co.uk) or Claire Darlow (claire.darlow@bodycontrol.co.uk) or post to: Body Control Pilates Education Ltd, 35 Little Russell Street, London, WC1A 2HH All information will be treated in the strictest of confidence.