



ENROLLMENT APPLICATION

To reserve your space in class, please return the application with a \$100 non-refundable fee to: Advanced Massage Therapeutics 2221 Goldsmith Ln. Louisville, KY 40218

First Name

Middle

Last

Street Address

City

State

Zip

Date of Birth

Home Phone

Alternate Phone

Email Address

Occupation

Employer

Work Phone

How did you hear about us?

Reason for taking the class

Yes

No

If yes, what?

Any past education / experience with massage?

a.m.

p.m.

Which class do you prefer? circle one

X

Signature

Date

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