



**GYROTONIC®**  
**Pre-Training**  
 April 30 – May 6, 2010  
 Elizabeth Dawson

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<b>Name:</b> (as you wish it to appear on the certificate)	<b>Home #:</b>
<b>Street:</b>	<b>Cell #:</b>
<b>City, State, Zip:</b>	<b>Work #:</b>
<b>E-mail:</b>	<b>Referred by:</b>

**Studio Affiliation:** \_\_\_\_\_  
**Street:** \_\_\_\_\_  
**City, State, Zip:** \_\_\_\_\_  
**Website:** \_\_\_\_\_

**Cost: \$950      Deposit: \$300**

**Prerequisite:** It is strongly recommended that the students wanting to enroll in a Pre-Training Course take some private or introductory lessons on the Pulley Tower prior to enrollment.

Day	Date	Hours	Day	Date	Hours
FRI	4/30	10:00am-3:00pm	TUES	5/4	10:30am-4:30pm
SAT	5/1	10:00am-3:00pm	WED	5/5	10:30am-4:30pm
SUN	5/2	10:00am-3:00pm	THURS	5/6	9:30am-4:30pm

If you have any injuries or weak areas of the body that could potentially warrant special attention during the course, please describe below:

\_\_\_\_\_

\_\_\_\_\_

I \_\_\_\_\_ understand that I alone am responsible for any accidents that occur or injuries that may be sustained in any work I may do as a part of my training at San Francisco **GYROTONIC®** (SFG) and that neither SFG nor any of its employees will be held liable for any such injuries or accidents. I have read and completely understand this statement and its contents. Any questions I may have had regarding this statement have been asked and answered to my satisfaction and comprehension.

I have enclosed: \$ \_\_\_\_\_

All deposits are non-refundable and non-transferable.

Please make checks payable to: **San Francisco GYROTONIC®**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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Reg dt.	Dep Dt.	Amt/Pmt type	Bal dt	Amt/Pmt type
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