



**GYROTONIC®**  
**Pre-Training**  
*December 13-19, 2021*  
 Master Trainer: *Debra Rose*

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

**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.

**Total Cost: \$1000      Deposit: \$300      Balance: \$700**

**Schedule:**

Day	Date	Hours	Day	Date	Hours
Monday	12/13	11:00am-6:00pm	Friday	12/17	11:00am-6:00pm
Tuesday	12/14	11:00am-6:00pm	Saturday	12/18	9:00am-4:00pm
Wednesday	12/15	11:00am-6:00pm	Sunday	12/19	11:00am-6:00pm

**Day off: Thursday 12/16**

Please tell us a little about your previous experience with the system:

**GYROTONIC® Experience - Please check one:**      Studio(s) where you practice or trainer(s) you practice with:

Less than 6 months

Less than 1 year

1-3 Years

3-7 years

\_\_\_\_\_

\_\_\_\_\_

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 the deposit of: \$ \_\_\_\_\_  
 All deposits are non-refundable and non-transferable.  
 Please make checks payable to: San Francisco GYROTONIC®  
 Balance due on the first day of the course

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