



GYROTONIC®
Pre-Training
July 1st - 3d & July 15th - 17th 2022
Trainer: Kate Jordan Augusto

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
Friday	7/1	10:30am - 5:30pm	Friday	7/15	10:30am - 5:30pm
Saturday	7/2	10:30am - 5:30pm	Saturday	7/16	10:30am - 5:30pm
Sunday	7/3	10:30am - 5:30pm	Sunday	7/17	10:30am - 5:30pm

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 _____ give my permission to SFG office staff to take pictures of me during the course and agree that those pictures may be used for SFG promotion.

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: _____