



Authentic Pilates, Feldenkrais, Massage Therapy
www.artofcontrol.com; aoc.secretary@gmail.com

State University of New York at Purchase College
735 Anderson Hill Road, Purchase, NY 10577
Ph. 914-251-7842 Fax 914-251-7823

ASCTP Teacher Training Certification Enrollment form – page 1

The Art and Science of Contrology: Traditional Pilates (ASCTP)¹
Professional Teacher Training Program Enrollment Form

Name

Address

Address 2

Phone (day) _____ (evening) _____

Cell _____

Email _____

SS # _____

Date of Birth _____

¹ ASCTP Professional Teacher Training Program is owned and operated by The Art of Control, Inc. © 2013. All rights reserved.



Authentic Pilates, Feldenkrais, Massage Therapy
www.artofcontrol.com; aoc.secretary@gmail.com

State University of New York at Purchase College
735 Anderson Hill Road, Purchase, NY 10577
Ph. 914-251-7842 Fax 914-251-7823

ASCTP Teacher Training Certification Enrollment form – page 2

Pilates Experience:

Instructor's Name

Studio Name

Studio phone

Number of sessions (or years of Pilates practice)

Please detail Pilates experience:

Additional fitness and movement activity:



Authentic Pilates, Feldenkrais, Massage Therapy
www.artofcontrol.com; aoc.secretary@gmail.com

State University of New York at Purchase College
735 Anderson Hill Road, Purchase, NY 10577
Ph. 914-251-7842 Fax 914-251-7823

ASCTP Teacher Training Certification Enrollment form – page 3

Medical History:

Physical limitations, pre-existing conditions, prior injury and/or surgeries:

Medications:

Emergency Contact:

Name _____

Relationship _____

Phone _____

Cell _____



Authentic Pilates, Feldenkrais, Massage Therapy
www.artofcontrol.com; aoc.secretary@gmail.com

State University of New York at Purchase College
735 Anderson Hill Road, Purchase, NY 10577
Ph. 914-251-7842 Fax 914-251-7823

ASCTP Teacher Training Certification Enrollment form – page 4

The requirements and conditions for participating in the ASCTP Professional Teach Training Certification Program are set forth below. Please read all terms carefully and return this form with your deposit.

1. By signing this agreement, the student acknowledges that he/she has read and understands all of the requirements and guidelines, and agrees to the following terms:
2. The student represents that he/she is in excellent mental and physical health prior to entering the ASCTP Professional Teacher Training Certification Program, and agrees to participate in the ASCTP Professional Teacher Training Certification Program at his/her own risk.
3. The student agrees to release The Art of Control, Inc., its agents and/or employees from any and all liability.
4. The Art of Control, Inc. reserves the right to terminate any student from the the ASCTP Professional Teacher Training Certification Program for misconduct or other unprofessional behavior, included but not limited to, violent or aggressive behavior, harassment, verbal or physical abuse, sexual harassment or misconduct, alcohol or drug use, theft, or other property damage. A student terminated from the ASCTP Teacher Training Certification Program shall not be entitled to, and shall not receive, a refund of any tuition.
5. No refunds will be given for incomplete participation. A student may request a leave of absence due to medical or personal reasons. Permission may be granted at the discretion of The Art of Control, Inc., or its designee.
6. The student acknowledges and agrees that all information, materials and/or records, in any format including but not limited to training manuals and/or materials, client names, addresses, phone numbers, email addresses, personal and professional details and financial information (collectively referred to as "Proprietary Information"), are the sole and exclusive confidential property of The Art of Control, Inc. and the ASCTP Professional Teacher Training Certification Program. The student specifically acknowledges and agrees that he/she shall not cause or permit any Proprietary Information to be copied, duplicated, photographed, scanned, verbally transmitted, reproduced, or stored digitally in any manner whatsoever. The student further acknowledges and agrees that the violation of this provision will cause The Art of Control, Inc. and ASCTP Professional Teacher Training Certification Program immediate and irreparable harm for which the financial damages to the Art of Control, Inc. may be difficult or impossible to calculate, either in the present or future, and that such a violation shall constitute a substantial and material violation of this agreement. Failure to adhere to this policy is grounds for immediate dismissal from the program without refund.



Authentic Pilates, Feldenkrais, Massage Therapy
www.artofcontrol.com; aoc.secretary@gmail.com

State University of New York at Purchase College
735 Anderson Hill Road, Purchase, NY 10577
Ph. 914-251-7842 Fax 914-251-7823

ASCTP Teacher Training Certification Enrollment form – page 5

7. Student apprentices are prohibited from teaching Pilates outside of The Art of Control Studio and/or Ambassador Studios until they have completed the ASCTP Professional Teacher Training Program and have acquired their Certificate of Certification. Any violation of this policy will result in expulsion from the ASCTP program.
8. Apprentice logs must be kept by the student and signed by The Art of Control, Inc., or its designee, on a timely basis. Copies of apprentice logs must be kept on file at the Art of Control.
9. Students are required to complete each Seminar level and apprenticeship hours before proceeding to the next level.
10. Modifications and exceptions to the apprenticeship program may be made at the sole discretion of The Art of Control, Inc., or its designee.
11. Cancellation policy: if the student pays tuition in full and cancels 30 days prior to the program start date, the student will be entitled to a tuition refund, less a \$100 processing fee.
12. The Art of Control, Inc. reserves the right to cancel the ASCTP Professional Teacher Training Certification Program if enrollment is less than 4 students.

I _____ acknowledge receipt and agreement with the above terms, and agree to abide by the policies and procedures of the Art of Control, Inc. and the ASCTP Professional Teacher Training Program.

Student signature _____ Date _____



Authentic Pilates, Feldenkrais, Massage Therapy
www.artofcontrol.com; aoc.secretary@gmail.com

State University of New York at Purchase College
735 Anderson Hill Road, Purchase, NY 10577
Ph. 914-251-7842 Fax 914-251-7823

ASCTP Teacher Training Certification Enrollment form – page 6

Tuition deposit enclosed: _____

Check # _____

Credit Card # _____

Visa _____ MC _____ AMEX _____

Name on Card _____

Expiration _____ Code _____

Billing Address:

Payment Schedule:

Student signature _____ Date _____