



BOOKING FORM

Please complete and return to the address below ASAP so that we can do our best to ensure a place on the course of your choice.

Name:
Address:
Postcode:
Tel:
E-mail:

Course ref. (A, B, C etc)

Number of places:

2nd choice if applicable:

Number of places:

Have you filled out a Physical Activity Readiness Questionnaire (PARQ) for this course? (Yes / No)

Where did you hear about So Pilates?

--

Please make sure the following are enclosed so we may process your booking as quickly as possible.

- Full Payment (cheques made payable to So Pilates)
- PARQ

The instructor for your chosen course will contact you to confirm your place. If you are not contacted before the course start date then please email us at office@so-pilates.co.uk

Thank you and we look forward to seeing you!



So Pilates, Suite 1B Gledhow Mount Mansion, Roxholme Grove, Leeds, LS7 4JJ
Tel: 0113 2620892

www.so-pilates.co.uk