

Institute of Natural Therapies Professional Massage Therapist

Program Application

P. O. Box 222, Hancock, MI 49930

Applications are accepted any time

Name _____
Last First Middle (Preferred Name)

Address _____
Street City State Zip

E-mail _____

Home telephone _____ Emergency telephone _____

Work phone _____ Social Security number _____

Birth date: ____/____/____
Month Day Year
[] Married [] Single [] Other _____

Employed by _____ [] Unemployed
(Name of business)

Are you currently a student elsewhere? _____ If yes, where: _____ Are you disabled? _____

Have you ever filed for disability compensation? _____ Do you have a learning disability? _____

Do you have any injuries that may prevent you from giving or receiving massage therapy? _____

If yes, describe _____

Do you have any special circumstance that we need to know about to best assist your learning? _____

Other workshops or related seminars _____

High School or GED from _____

College _____ Degree Earned _____

Licenses and certifications _____

Have you ever been convicted of a violation of the penal laws of any State or of the United States? _____ If yes, explain (use an additional sheet of paper if necessary). _____

Were you referred to I.N.T. by an I.N.T. graduate? _____ If so, who and when? _____

Check box if you now own a massage therapy table. [] (You will receive a discount on your initial payment.)

I hereby certify all the above statements are true. I understand that falsification or failure to disclose information on this application or any attached materials will be considered fraud and can cause me to be dismissed immediately from this school without refund or diploma.

X _____
Signature Date

Sending your application and fee early will ensure your space in the class of your choice. All payments will be refunded by mail September 1 if your class option is cancelled. Please see catalog page 14 and select below:

CHOOSE A LEVEL:

- [] Level I [] Level II [] Level III

CHOOSE A CLASS LOCATION/SCHEDULE: (We cannot guarantee availability or location)

- [] Option 1: Weekend Class in Houghton/Hancock [] Option 2: Weekend Class in Marquette

- [] Option 3: Weekend Class in St. Ignace (Northern Lower Michigan)

If my option is cancelled, I can participate in another class option: [] Yes [] No

Please indicate your second choice _____