



# Course Registration Form

Today's Date: \_\_\_\_\_

Course Type: (Check One)

Group Fitness

Personal Trainer

Older Adult

Other

Class Date: \_\_\_\_\_

Location: \_\_\_\_\_

Student Name:

\_\_\_\_\_

E-mail:

\_\_\_\_\_

Mailing Address:

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Amount enclosed: \_\_\_\_\_ Check # \_\_\_\_\_

Visa/MasterCard/Discover#:

\_\_\_\_\_ Exp: \_\_\_\_\_

Name on the card if different from student:

\_\_\_\_\_

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

Entire Form must be returned with payment. Forms will be accepted via mail or fax to the following:  
W.I.T.S. 206 76<sup>th</sup> Street, Suite A Virginia Beach, VA 23451 Attn: Registration OR Fax: 757-428-3873

Questions please call: World Instructor Training Schools  
1-888-330-9487 / in VA 757-428-4796 / Fax 757-428-3873

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## For Office Use Only

Date Received: \_\_\_\_\_ Amount: \_\_\_\_\_ Received By: \_\_\_\_\_