



Introductory massage workshop

Application form

Title	First name	Last name			
Mr / Mrs / Miss / Ms:					
Address					
Postcode		Date of birth		Nationality	
Tel: Day	Tel: Mobile		Email		

Code for Introductory Course you wish to attend Found next to course dates: www.thecssm.co.uk/massage-introduction-workshop	
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	Yes / No
If the course you are applying for is full, would you like to reserve a place on the following one?	

Full Fee of £200.00 enclosed cheque payable to Cambridge School of sports massage	
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Signed	Date
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