

Denton Massage School
Continuing Education Registration Form

Class Name: _____

Class Dates: _____ Class Price \$ _____

Name _____

Address _____

Phone number(s): _____

\$_____ enclosed, Class paid in full

\$_____ enclosed, Deposit of \$75.00, balance due day of class*

\$_____ enclosed, supply fee

\$_____ enclosed, text fee

\$_____ Total amount enclosed

_____ Paid by check# _____

_____ Paid with credit card # _____, Exp. date _____

How did you hear about our class? _____

You will be mailed a confirmation letter within 10 days of class with a list of supplies needed for this class. If registered within 10 days, we will get you a confirmation letter as soon as possible. *Deposits are non-refundable. Cancellations must be made 48 hour before class, after 48 hours no refund.