



Chicago School of Thai Massage

Application for Admission

Advanced Training 1

A complete application must include:

- a. The application form filled out completely
- b. \$500 Deposit or Payment in Full – Check made out to "Chicago School of Thai Massage" or Credit Card (Info at end of Application)

Please mail the application to:

Chicago School of Thai Massage
PO Box 6046
Lindenhurst, IL 60046

The next step:

Once we receive your completed application, we will contact you for a phone interview.

General Information

Date: _____

Birthdate: _____
Month/Day/Year

First Name _____ Last Name _____

Address _____
Street

City _____ State _____ Zip _____

Phone (_____) _____ (_____) _____
Cell Home

Email _____
Please print legibly!

Emergency Contact _____
Name and Phone

141 W. Jackson Ste. 750 Chicago, IL 60604

www.chicagoschoolofthaimassage.com

312-361-0034

Introduced To CSTM by

If there is a specific individual who recommended you to CSTM, please write their name below.

Name _____

Education

High School _____

Location _____ Graduation _____
Month Year

College / University _____

Location _____ Dates Attended _____

Degree Earned _____ Major _____

Other Training / Education / Degrees _____

Thai Massage Training (List all the hours of training, all the schools you have attended and teachers you have had)

	School	Instructor	Course	Hours
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____

Total hours of Thai massage training: _____

Do you currently practice Thai Massage?

If you answered yes: Is Thai Massage your primary source of income? If not, what is your other job or jobs?

What other types of body or energy work do you practice, if any?

What do you hope to get out of this program?

Have you been to Thailand? _____ If not, do you plan on going? _____

Do you have a meditation practice? If so, what does it entail?

Please describe your other self-care practices, i.e. yoga, qi gong, tai chi, etc.

The \$500 Deposit must be included with this application.

If paying by check:

_____ My check made out to Chicago School of Thai Massage is enclosed.

If paying by credit card:

Card Number (Visa or MC Only) _____

Expiration Date _____

The deposit holds your space in the Advanced Training 1 program. If you choose not to enroll or you cancel your enrollment prior to the start of the program, you will receive a full refund.