

Renew Wellness Center and School of Massage
7043 Pearl Rd. Middleburg Hts. OH 44130
440.842.5770
Entrance - in the back of the building

Program Application

Name - First & Last

Address

Phone Number

Cell Phone Number

E-mail Address

Soc. Security Number

Date of Birth

Program Name- Choose One

Massage Therapy Massage Practitioner

9 Month _____ 4 Month _____
12 Month _____
17 Month _____

Beginning date of term _____

Minimum requirements:
High School Graduate
GED Equivalent

Do you meet the minimum requirements? Yes No

Cash, Check, Money Order, Visa, MasterCard, and Discover are all acceptable forms of payment.
You may also choose to fill out the Loan Application provided on the Web site (below Program Application).
Please submit:
program application + payment or loan application

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Any questions may be forwarded to: info@renewwellnesscenter.net