

*The Connecting Point
School of Massage*

Application Form

Name _____

Address _____

Phone _____

Birth Date _____

Social Security Number _____

What program are you applying to? _____

Please provide a letter in regard to your intent to study at The Connecting Point.

Please include a resume listing educational background and work history.

Please provide two professional references, including name, number and relationship to you.

Please return application to:
The Connecting Point
Post Office Box 2101
Telluride, Colorado 81435

