CERTIFICATION RENEWAL FORM

Dear Peak Pilates® Instructor,

It's time to renew! Your certification expires every two years after the date it was issued. You may either progress into the next level of training, or you will need to complete 14 continuing education credits (CECs) to maintain your status as a certified Peak Pilates instructor.

In order to keep your certification current, you are required to complete 14 CECs every two years. Of those 14 CECs, at least 6 must be awarded from Peak Pilates. You can submit a maximum of 8 CECs from non-Peak Pilates presenters or workshops. In general, we honor 1 CEC per hour of workshop for non-Peak Pilates sessions. We do not award CECs for general fitness workshops; however, we do award CECs for Peak Pilates-related movement, anatomy and kinesiology workshops. Please note: no refunds will be issued for any rejected petitions.

CECs can be earned through our online CEC library (peakpilates.com/education/find-a-training?onlinelearning), live sessions at one of our education centers, or by attending our annual Pilates Empowerment Summit (PES), where you can earn all 14 CECs in one weekend. For more information on this inspirational event, please visit www.pilatesempowermentsummit.com. You can also meet your renewal requirements by enrolling in the next level of the Peak Pilates Certification Pathway. If your certification has been expired more than two years you can either challenge the assessment or take the Bridge Course to renew. Additional fees apply.

Name 
Street Address: 
City: State: Zip Code: 
Home Phone: Mobile Phone: Email: 

Please list any non-Peak Pilates courses and/or Evolve lessons (3 lessons max). Proof of attendance is required.

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<th>Name of Course</th>
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<th>Date of Course</th>
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Check boxes that apply:

- $69.95 renewal fee
- $9.95 per course petitioned. Number of courses petitioned _____ x $9.95 = $_______
- $50.00 late fee (NOTE: if your certification has been expired for over 90 days, you must pay this late fee in addition to the renewal fee.)

To renew your certification, please return this form with payment enclosed.

Payment method (Check One)

☐ VISA ☐ MasterCard® ☐ AMEX® ☐ Discover®

CARD NO. EXP. DATE CVV CODE

NAME AS IT APPEARS ON CARD SIGNATURE

BILLING ADDRESS

EMAIL ADDRESS PHONE

THE ABOVE CARDHOLDER AUTHORIZES MAD DOGG ATHLETICS TO CHARGE THEIR ACCOUNT.

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