



McKay Massage & Hydrotherapy Program

Application Checklist

PART A Registration for Introductory Seminar/Workshop

A

1. Please contact the registrar at (306) 955-2622, ext. 101, for upcoming dates.
2. Fill out the seminar registration form and send the \$80.00 fee in advance to McKay Career Training. When the college receives the application, potential students will then receive an admissions letter and an agenda for the seminar.
3. Attendance for the Intake Seminar is a pre-requisite for acceptance.
4. Potential students may attend for information only; however a completed "Intake Package" is required to be considered for acceptance into the program.

PART B Application Paragraphs

B

* Answer **each** of the following questions concisely with (75-100 words, typed format)

1. Why do you want to become a Massage Therapist?
2. Describe your experience of receiving a professional therapeutic massage.
3. What are the 2 most important qualities possessed by a successful massage therapist?
4. What are the best aspects of the massage therapy practices you have visited?
5. What do you personally have to offer this profession?
6. What role do you believe Massage Therapy should play in the allied health care field?
7. What are your professional plans upon graduation?

PART C Requested Information for "Intake Package"

C

1. Please include your application paragraphs as outlined above in Part B.
2. Official school transcripts indicating Grade 12 graduation with Biology (30)
3. Grade 12 students must submit their interim marks to attend seminar.
4. An employment resumé.
5. Two current non-family reference letters from people who have known you for two years.
6. A letter from a medical doctor verifying you are physically and emotionally able to meet the demands of the program and the profession.
7. Copies of other education certificates, diplomas, or degrees. (If applicable).
8. A receipt from a professional Registered Massage Therapist.
9. A recent photo of yourself.
10. Non-refundable \$40.00 application fee payable to: McKay Career Training.

NOTE: Prospective students are advised to submit completed packages to the Program Director on the day of the seminar.

Please sign below indicating the information on this application is true and accurate to the best of your knowledge.

Signature _____ Date _____



McKay Massage and Hydrotherapy Program

Division of McKay Career Training
133 - 3rd Avenue North
Saskatoon, SK S7K 2H4
(306) 955-1616

Introductory Massage Therapy Seminar Registration Form

Full Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone: _____ (H) _____ (W) _____ (C)

Email address: _____ Birth Date: _____

*Note: * If you will not be 18 years of age at the time of seminar, you will need your parent's (guardian's) written consent in order to participate in seminar. Please include consent form or letter in your seminar package.*

Date: _____ (Please call the registrar for upcoming dates.)

Registration: \$80.00 (Canadian)

Please include with this form your Cheque or Money Order payable to McKay Career Training Inc.

NOTICE:

All applicants currently in Grade 12, who have not obtained credit for Biology 30 to date, please inform the instructors that you are in the process of taking Biology 30.

REFUNDS:

Any request for a refund must be received by the office in writing no later than 5 days prior to the date of seminar.

I have **READ** and **UNDERSTOOD** this contract.

Signature of Applicant: _____

Signature of College Representative: _____

Date: _____

*** Upon receipt of this advanced registration students will receive a day agenda and a letter of admission.



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Seminar and Program Waiver (for Minor under 18)

**This waiver also applies to applicants under the age of 18 on the program start date*

Informed Consent/Waiver: (to be completed by parent/guardian/consent advocate)

I, _____ (parent's name) give permission for
(son/daughter's name) _____ to fully participate in the hands-on
massage therapy workshop being offered as part of the Intake Seminar on
_____ (date).

I understand that this therapeutic massage hands-on workshop (**for the purpose of introducing basic massage techniques**) will be facilitated by a professional registered massage therapist who is also an instructor for the McKay Massage and Hydrotherapy program.

I understand that information shared on the case history form will be used to ensure that sufficient information is gathered to allow for full participation in the hands-on workshop.

I fully understand the aforementioned terms and conditions for the seminar. I absolve McKay Career Training Inc., its agents, instructors, clinical supervisors and seminar participants for any losses of personal effects, damages (personal or otherwise) as a result of participation in the hands-on workshop in the Intake Seminar for the McKay Massage and Hydrotherapy program.

Signature of Parent/Guardian/Consent Advocate: _____

Name of Parent (Please print): _____ Phone #: _____

Date: _____

Signature of Seminar Participant: _____

Date: _____