

# Registration Form

## Functional Exercise Trainer

October 1st & 2nd, 2015 - Flagstaff, Arizona



### Registration & Payment

To register, you must complete both of the following:  
- send in this form with complete, accurate information  
- include credit card information or a check payable to:

**Institute for Sports, Health & Fitness**  
PO Box K, Flagstaff, AZ 86002  
EIN 93-1335474 DUNS#788872039

### Registrant Information

Name \_\_\_\_\_

Tribal Affiliation \_\_\_\_\_ State \_\_\_\_\_

Phone Work \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_ Choose Shirt Size    S    M    L    XL

**Payment** - due September 15th, 2015. A late fee of \$35 will be added for each individual making payment after the above date.

\$445.00 - Functional Exercise Trainer Certification - October 1st & 2nd

Payment (We do not accept Purchase Orders)

VISA    MC    Check    Money Order (payable to: Institute for Sports, Health & Fitness)

Credit Card # \_\_\_\_\_ 3 Digit Security Code \_\_\_\_\_

Expiration Date \_\_\_\_\_ CC Zip Code \_\_\_\_\_ Total Payment \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Cancellation Policy:** To cancel and receive a refund, you must give written cancellation notice 2 weeks prior to the start of the event date. You will receive a refund payment minus a \$55.00 processing fee. Cancellations after that date & no shows will receive a full credit towards future NAFC trainings. NAFC reserves the right to cancel this event at any time and a full refund for registration fees only will be returned.

Native American Fitness Council

phone **928 774 3048** fax 928 774 3049

email [info@nativeamericanfitnesscouncil.com](mailto:info@nativeamericanfitnesscouncil.com) website [www.nativeamericanfitnesscouncil.com](http://www.nativeamericanfitnesscouncil.com)



**Agenda**  
**Functional Exercise Trainer Certification**  
October 1st & 2nd, 2015 - Flagstaff, Arizona

**Agenda**

**Day 1**

- 8:00 - 8:15 Registration
- 8:15 - 9:15 Introduction to Functional Movement
- 9:15 - 10:00 Establishing a Systematic Approach to Functional Exercise
- 10:00 - 10:15 Break
- 10:15 - 12:00 Functional Resistance Training (Cables & Free Weights)
- 12:00 - 1:00 Lunch
- 1:00 - 2:45 MMA Style Training
- 2:45 - 3:00 Break
- 3:00 - 4:15 TRX Suspension Training
- 4:15 - 4:30 Questions & Answers

**Day 2**

- 8:00 - 9:15 Review
- 9:15 - 10:00 Functional Power Training (Med Balls & Sandbags)
- 10:00 - 10:15 Break
- 10:15 - 12:00 Kettle Bell Training
- 12:00 - 1:00 Lunch
- 1:00 - 2:45 Functional Core Training
- 2:45 - 3:00 Break
- 3:00 - 4:15 Programming Functional Exercise Workouts
- 4:15 - 4:30 Awarding of Certificates

(instructors & agenda topics/times subject to change)



**Travel Information**  
**Functional Exercise Trainer Certification**  
October 1st & 2nd, 2015 - Flagstaff, Arizona

**Training Site**

NAU Health & Learning Center - Northern Arizona University Campus  
Northern Arizona University Building # 25, Phone: (928) 523-1733  
824 S. San Francisco Street, Flagstaff, AZ 86011

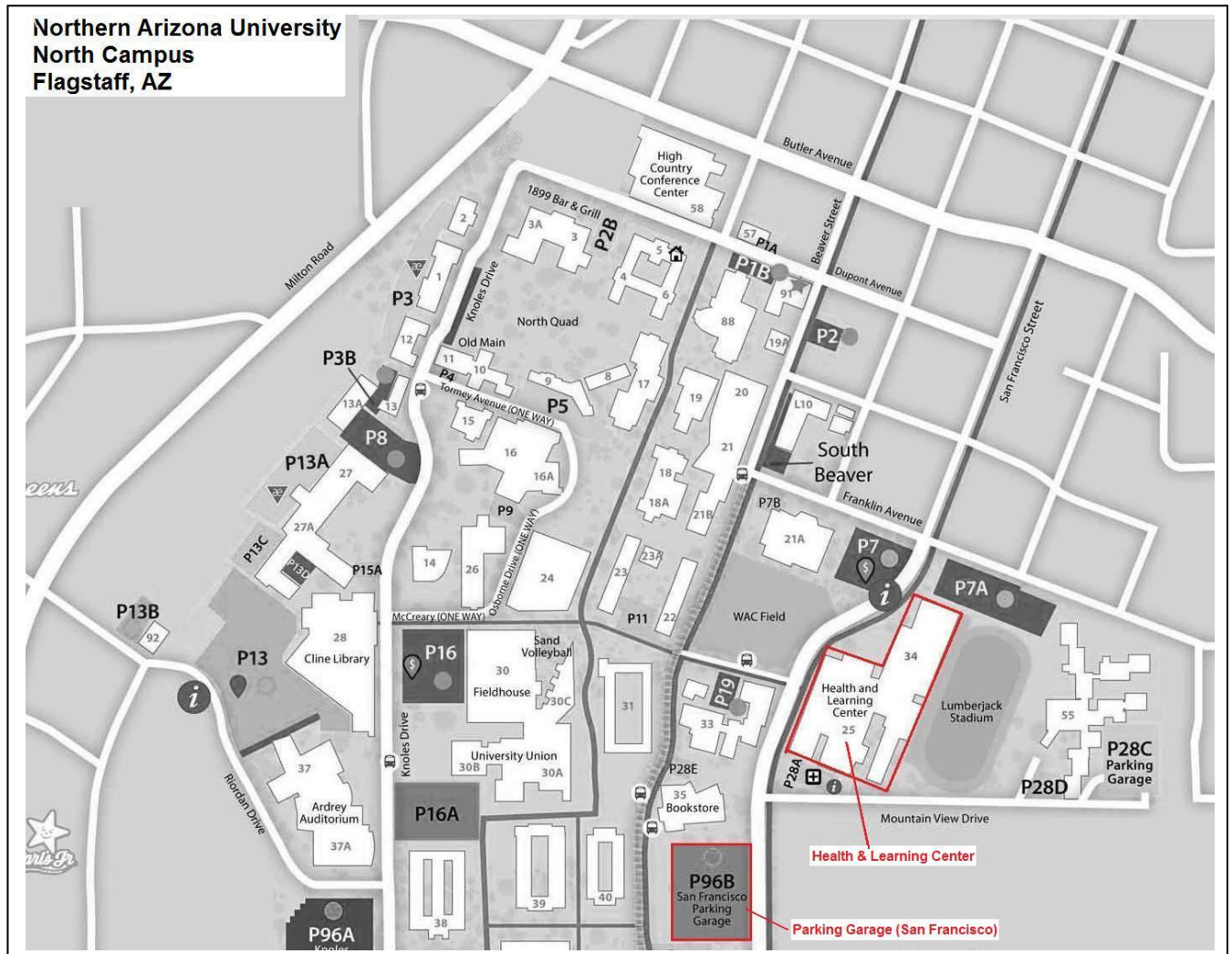
**Parking on the Northern Arizona University Campus**

Government Vehicles

If you are driving a government vehicle with government plates, you do not need a permit. Park in any lot, but not restricted spaces (i.e. handicapped). Proceed to the Health & Learning Center.

Non-Government Vehicle's

We recommend using the Parking Garage on San Francisco Street. A day permit costs \$10. The permit must be printed and displayed in its entirety on the passenger side windshield. After complying, proceed to the Health & Learning Center. The garage accepts Visa, MasterCard, American Express, Discover, and debit cards with Visa and MasterCard logos only.



**Meals on Your Own**

A light morning snack is provided. Plan on bringing a lunch, eating at the dining services buffet at NAU (about \$10) or at a local restaurant.

**Workout Clothing**

NAFC teaches through hands on exercise. The movements are fun and most are non-strenuous. Wear appropriate workout clothing & gym shoes. Plan to participate at your own comfort & safety level!

**Recommended Hotels**

Sold Out! ~~Drury Inn & Suites~~

Secure your hotel room asap as they are selling out fast (especially Friday night stays) due to a family weekend event at NAU. Call us if you need any help!

As of today 9/9/15 the best options on Expedia are:

3 Night Stay

Check In Wednesday Sept. 30th & Check Out Oct. 3rd

La Quinta \$146/night - 928 556 8666

Americas Best Inn \$75/night (basic hotel) - 928 774 7171

2 Night Stay

Check In Wednesday Sept. 30th & Check Out Oct. 2nd

Baymont Inn & Suites \$70/night - 928 773 1300

Hotel Monte Vista \$105/night (a fun downtown location) 928 779 6971

La Quinta \$115/night - 928 556 8666

Americas Best Inn \$52/night (basic hotel) - 928 774 7171

**Local Airport**

Pulliam (airport code FLG)



**Institute for Sports, Health & Fitness Information for Accounts Payable Departments**

**Type of Payments Accepted**

We do not accept Purchase Orders

Credit Card - Visa or MasterCard

Check or Money Order - Made out to the: **Institute for Sports, Health & Fitness**

**If Needing an Invoice**

Email or call us with the invoice request and complete information you require. Please include Name of Organization, Name(s) of Attendee, Trainings Attending, Total Amount.

**Financial Information**

Institute for Sports, Health & Fitness LLC

EIN 93-1335474, DUNS# 788872039

2015 W9

|   |   |  |  |
|---|---|--|--|
| Form <b>W-9</b><br>(Rev. October 2007)<br>Department of the Treasury<br>Internal Revenue Service  | <b>Request for Taxpayer<br/>         Identification Number and Certification</b>  | Give form to the<br>requester. Do not<br>send to the IRS.                                      |  |
| Print or type<br>See Specific Instructions on page 2.   | Name (as shown on your income tax return)<br><b>Institute for Sports, Health &amp; Fitness</b>  |  |  |
|   | Business name, if different from above  |  |  |
|   | Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Partnership<br><input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ ..... <input type="checkbox"/> Exempt payee<br><input type="checkbox"/> Other (see instructions) ▶ |  |  |
|   | Address (number, street, and apt. or suite no.)<br><b>P.O. Box K</b>  | Requester's name and address (optional)  |  |
|   | City, state, and ZIP code<br><b>Flagstaff, AZ 86002</b>   | List account number(s) here (optional)   |  |
| <b>Part I Taxpayer Identification Number (TIN)</b>  |   |  |  |
| Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> on page 3.<br><b>Note.</b> If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.   |   | Social security number<br>_____<br>or<br>Employer identification number<br><b>93 : 1335474</b> |  |
| <b>Part II Certification</b>  |   |  |  |
| Under penalties of perjury, I certify that:   |   |  |  |
| 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and  |   |  |  |
| 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and   |   |  |  |
| 3. I am a U.S. citizen or other U.S. person (defined below).  |   |  |  |
| <b>Certification instructions.</b> You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4. |   |  |  |
| <b>Sign Here</b>  | Signature of U.S. person ▶   | Date ▶ <b>1/1/2015</b>   |  |