



Registration Form



Midwest Native Fitness Event

October 14th - 18th, 2024 - Hinckley, MN
Sponsored by Mille Lacs Band of Ojibwe



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:

Native American Fitness Council
P.O. Box 4468, Durango, CO 81302
EIN 84-4187667

Registrant Information

Name _____

Tribal Affiliation _____ State _____

Phone Work _____ Cell _____

Email _____ Choose Shirt Size S M L XL 2X

Payment

Save by purchasing the All Access Pass (both trainings) or select individual sessions.

- \$1,195.00 - All Access Pass (Both Trainings - 5 Days) October 14th - 18th
- \$755.00 - Medical Conditions & Exercise Certification - October 14th - 16th
- \$545.00 - Exercise & Aging Specialist Certification - October 17th & 18th

Payment is due **September 25th, 2024!** A \$35 fee will be added for later payments.

Payment (We do not accept Purchase Orders)

- VISA MC Check Money Order (payable to: Native American Fitness Council)

Credit Card # _____ 3 Digit Security Code _____

Expiration Date _____ CC Zip Code _____ Total Payment _____

Signature _____ Date _____

Cancellation Policy: To receive a refund, you must give written cancellation notice 4 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 minus a \$55.00 processing fee. 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**

email john@nativeamericanfitnesscouncil.com website www.nativeamericanfitnesscouncil.com



Agenda
Medical Exercise Instructor Certification
October 14th - 16th, 2024 - Hinckley, MN

Agenda

Day 1

- 8:00 - 8:15 Registration & Sign In
- 8:15 - 9:30 The Fitness Professional's Role Working with the Medical Community
- 9:30 - 10:00 Exercising with Medical Conditions
- 10:00 - 10:15 Break
- 10:15 - 12:00 Chronic Disease & Exercise - Hypertension, Heart Diseases
- 12:00 - 1:00 Lunch
- 1:00 - 2:30 Chronic Disease & Exercise - Respiratory Diseases
- 2:30 - 2:45 Break
- 2:45 - 3:15 Special Conditions - Pregnancy
- 3:15 - 4:15 Working with Youth & Elders
- 4:15 - 4:30 Questions & Answers

Day 2

- 8:00 - 8:15 Introductions & Warm-up
- 8:15 - 10:00 Chronic Disease & Exercise - Diabetes
- 10:00 - 10:15 Break
- 10:15 - 12:00 Chronic Disease & Exercise - Cancer
- 12:00 - 1:00 Lunch
- 1:00 - 2:30 Chronic Disease & Exercise - Arthritis
- 2:30 - 2:45 Break
- 2:45 - 3:15 Functional Exercise System Lecture
- 3:15 - 4:15 Functional Exercise System - Lower Body Hands On
- 4:15 - 4:30 Questions & Answers

Day 3

- 8:00 - 9:30 Warm-up - Tai Chi Elder Workout
- 9:30 - 10:00 Relaxation Exercise Lecture - Breathing & Soft Tissue Mobilization
- 10:00 - 10:15 Break
- 10:15 - 12:00 Relaxation & Balance Exercises Hands On
- 12:00 - 1:00 Lunch
- 1:00 - 2:30 Functional Exercise System - Core Hands On
- 2:30 - 2:45 Break
- 2:45 - 4:15 Functional Exercise System - Upper Body Hands On
- 4:15 - 4:30 Awarding of Certificates

(instructors & agenda topics/times subject to change)



Agenda
Exercise & Aging Specialist Certification
October 17th & 18th, 2024 - Hinckley, MN

Agenda

Day 1

- 8:00 - 8:15 Check In
- 8:15 - 8:30 Introduction - Exercise & Aging Specialist Certification
- 8:30 - 9:30 The Importance of Helping our Native Elders
- 9:30 - 10:00 Physical Effects of Aging on Individuals
- 10:00 - 10:15 Break
- 10:15 - 11:00 Exercise and Aging
- 11:00 - 12:00 Resistance, Endurance, Balance & Flexibility Training for Older Adults
- 12:00 - 1:00 Lunch
- 1:00 - 2:00 Effectively Training Adults & Elders
- 2:00 - 2:45 Introduction to Functional Exercise Training System
- 2:45 - 3:00 Break
- 3:00 - 4:15 Starting an Elder Exercise Program
- 4:15 - 4:30 Questions & Answers

Day 2

- 8:00 - 8:15 Group Introductions
- 8:15 - 9:15 Martial Arts Inspired Movements for Elders
- 9:15 - 10:00 Senior Living Community Fitness Program
- 10:00 - 10:15 Break
- 10:15 - 11:00 Senior Living Community Fitness Program (continued)
- 11:00 - 12:00 Functional Exercise Training System - Balance & Agility
- 12:00 - 1:00 Lunch
- 1:00 - 2:45 Functional Exercise Training System - Strength
- 2:45 - 3:00 Break
- 3:00 - 4:15 Walking Strong Program
- 4:15 - 4:30 Awarding of Certificates

(instructors & agenda topics/times subject to change)



Travel Information
Midwest Native Fitness Event
October 14th-18th, 2024 - Hinckley, MN

Participants must attend the complete event to receive certification so plan flights & travel accordingly!

Training Site

Meshakwad Community Center 1-320-336-0220
38043 Hinckley Road
Hinckley, MN 55037

The Meshakwad Community Center is a short half mile walk from the Grand Casino Hinckley Hotel.

Official Hotel

Grand Casino Hinckley Hotel 1-800-472-6321
777 Lady Luck Drive
Hinckley, MN 55037

A block of rooms, with 2 queen beds, have been designated for Personal Trainer Certification attendees for 5 nights (Check In: Monday Oct 13th - Check out Friday Oct 18th) with a base rate of \$89/night.

[Hotel Link](#)

Available rooms are limited & reservations should be made before October 7th to receive the above rates. Reserve rooms by calling Grand Casino Hinckley Hotel at 1-800-468-3517 or by booking online with the Group Code. Guests should identify **Group Code MF1013H** when making reservations.

Local Airport

Minneapolis - Saint Paul International Airport (airport code MSP)

Ground Transport

Rental car provides the best option to get from the airport to the Grand Casino Hinckley Hotel.

The suggested shuttle transportation from MSP Airport to Hinckley, MN is Groome Transportation. The cost is about \$42.00 one way when booked online. www.groometransportation.com/duluth The drop off point in Hinckley, MN is Tobie's Station which is about 1.7 miles from the casino hotel.

Plan ahead of time to get a taxi, Uber or Lyft from Tobie's Station to the Grand Casino Hinckley Hotel as they are not available on spur of the moment.

Meals on Your Own

Light snacks and beverages will be provided in the morning. Meals are on your own.

Hands On Learning

NAFC teaches through hands on exercise. The movements are fun and many are non strenuous. Wear appropriate workout clothing (jacket for outdoors) & gym shoes. Plan to participate at your own comfort & safety level as approved by your physician!



Native American Fitness Council 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: **Native American Fitness Council**

If Needing an Invoice

Email us with the invoice request and complete information you require. Please include Name of Organization, Names of Attendees, Trainings Attending & Total Amount.

Financial Information

Native American Fitness Council

Nonprofit Organization

EIN 84-4187667

Form <b style="font-size: 24pt;">W-9 (Rev. October 2018) Department of the Treasury Internal Revenue Service	Request for Taxpayer Identification Number and Certification ▶ Go to www.irs.gov/FormW9 for instructions and the latest information.	Give Form to the requester. Do not send to the IRS.																						
1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Native American Fitness Council																								
2 Business name/disregarded entity name, if different from above																								
Print or type. See specific instructions on page 3.	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.																							
	<input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate																							
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ <small>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small>																							
	<input checked="" type="checkbox"/> Other (see instructions) ▶ Nonprofit Exempt																							
4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>																								
5 Address (number, street, and apt. or suite no.) See instructions. P.O. Box 4468		Requester's name and address (optional)																						
6 City, state, and ZIP code Durango, CO 81302																								
7 List account number(s) here (optional)																								
Part I Taxpayer Identification Number (TIN) 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 generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. 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> , later. <small>Note: If the account is in more than one name, see the instructions for line 1. Also see <i>What Name and Number To Give the Requester</i> for guidelines on whose number to enter.</small>																								
		Social security number <table border="1" style="width:100%; height: 20px;"> <tr> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> </tr> </table> or Employer identification number <table border="1" style="width:100%; height: 20px;"> <tr> <td style="width: 20px;">8</td> <td style="width: 20px;">4</td> <td style="width: 20px;">-</td> <td style="width: 20px;">4</td> <td style="width: 20px;">1</td> <td style="width: 20px;">8</td> <td style="width: 20px;">7</td> <td style="width: 20px;">6</td> <td style="width: 20px;">6</td> <td style="width: 20px;">7</td> </tr> </table>													8	4	-	4	1	8	7	6	6	7
8	4	-	4	1	8	7	6	6	7															
Part II Certification 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); and 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.																								
Certification instructions. 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 for Part II, later.																								
Sign Here	Signature of U.S. person ▶ <i>JL Blinn</i>	Date ▶ 1/1/2024																						