



# Registration Form

## PERSONAL TRAINER CERTIFICATION

March 24<sup>th</sup> – 27<sup>th</sup>, 2025 – Las Vegas, Nevada  
Sponsored by: Las Vegas Paiute Tribe



### Registration & Payment

Register online [click here](#)

Or register by completing 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

\$995.00 - Personal Trainer Certification – March 24<sup>th</sup> – 27<sup>th</sup>, 2025

Payment is due **March 15th, 2025!** 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](mailto:john@nativeamericanfitnesscouncil.com) website [www.nativeamericanfitnesscouncil.com](http://www.nativeamericanfitnesscouncil.com)

**SOLD OUT**  
**REGISTRATION CLOSED**



## **Agenda**

### **Personal Trainer Certification**

March 24th – 27th, 2025 – Las Vegas, Nevada

\*Note - Participants must attend the complete event to receive the Personal Trainer Certificate!

#### **Day 1**

8:00 - 8:15 Registration  
8:15 - 8:30 Introduction  
8:30 - 10:00 Posture  
10:00 - 10:15 Break  
10:15 - 12:00 Body Mechanics  
12:00 - 1:00 Lunch  
1:00 - 2:30 Balance Exercise  
2:30 - 2:45 Break  
2:45 - 4:15 Stabilization Training  
4:15 - 4:30 Questions & Answers

#### **Day 2**

8:00 - 8:30 Introductions & Warm-up  
8:30 - 10:00 Flexibility Training  
10:00 - 10:15 Break  
10:15 - 12:00 Resistance Training Lecture  
12:00 - 1:00 Lunch  
1:00 - 2:30 Resistance Training Lower Body - Hands On  
2:30 - 2:45 Break  
2:45 - 4:15 Resistance Training Core - Hands On  
4:15 - 4:30 Questions & Answers

#### **Day 3**

8:00 - 8:30 Warm-up  
8:30 - 10:00 Resistance Training Upper Body - Hands On  
10:00 - 10:15 Break  
10:15 - 12:00 Resistance Training Upper Body - Hands On (continued)  
12:00 - 1:00 Lunch  
1:00 - 2:30 Functional Training  
2:30 - 2:45 Break  
2:45 - 4:15 Professional Standards & Documentation  
4:15 - 4:30 Questions & Answers

#### **Day 4**

8:00 - 8:30 Warm-up  
8:30 - 10:00 Endurance Training Lecture  
10:00 - 10:15 Break  
10:15 - 12:00 Endurance Training - Testing  
12:00 - 1:00 Lunch  
1:00 - 2:45 Endurance Training - Hands On  
2:45 - 3:00 Break  
3:00 - 4:15 Program Design  
4:15 - 4:30 Awarding of Certificates

Topic/Times Subject to Change



**Travel Information**  
**Personal Trainer Certification**  
March 24th – 27th, 2025 – Las Vegas, Nevada

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

**Training Site**

Las Vegas Paiute Tribe Wellness Center  
1279 Paiute Circle  
Las Vegas, Nv. 89106  
Telephone Contact: Ty 702-382-0784 ext. 417  
The walk to the training site is 1.2 miles from the Plaza Hotel & Casino.

**Hotel**

Plaza Hotel & Casino  
1 N Main St, Las Vegas, NV 89101  
Telephone  
Hotel Rooms – \$59+ average nightly rate March 23<sup>rd</sup> – 27<sup>th</sup> if booked by March 6<sup>th</sup> cut off date!  
Phone Reservations: 800 634 6575 Use Group Code: **SNATF25**  
Online Reservations: <https://book.passkey.com/go/SNATF25>

**Local Airport**

Harry Reid International Airport – Las Vegas Nevada  
There are many ground transportation options from the airport to the hotel.

**Meals on Your Own**

Morning refreshments will be provided. Lunch will be on your own with plenty of local dining options.

**Hands On Learning**

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



## Native American Fitness Council Information for Accounts Payable Departments

### Type of Payments Accepted

We do not accept Purchase Orders!

Credit Card - Visa or MasterCard (pay online or email/mail/phone in cc info)

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 Payment Amount.

### Financial Information

Native American Fitness Council

Nonprofit Organization

EIN 84-4187667

<b>Form W-9</b> (Rev. October 2018) Department of the Treasury Internal Revenue Service		<b>Request for Taxpayer          Identification Number and Certification</b> ▶ Go to <a href="http://www.irs.gov/FormW9">www.irs.gov/FormW9</a> 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. <b>Native American Fitness Council</b>					
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 <b>one</b> of the following seven boxes.			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>	
	<input type="checkbox"/> Individual/sole proprietor or single-member LLC				
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ <b>Note:</b> 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.				
<input checked="" type="checkbox"/> Other (see instructions) ▶ <b>Nonprofit Exempt</b>					
5 Address (number, street, and apt. or suite no.) See instructions. <b>P.O. Box 4468</b>			Requester's name and address (optional)		
6 City, state, and ZIP code <b>Durango, CO 81302</b>					
7 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 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. <b>Note:</b> 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.					
			Social security number [ ][ ] - [ ][ ] - [ ][ ][ ][ ]		
			or Employer identification number [ ][ ][ ] - [ ][ ][ ] [ ][ ][ ][ ]		
			8 4 - 4 1 8 7 6 7		
<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); and 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.					
<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 for Part II, later.					
<b>Sign Here</b>	Signature of U.S. person ▶ <i>Jh A Blinnitt</i>		Date ▶ 1/1/2025		