RESIST-A-BALL (RAB) CERTIFICATION WORKSHOP REGISTRATION FORM

Can-Fit-Pro

RESIST-A-BALL®

Please print your name as you would like it to appear on your certificate.

☐ Miss ☐ Mr ☐ Mrs ☐ Ms ☐ Dr

Club or Business: _____

Title (fitness instructor, personal trainer): _____

Last Name	First Name	Middle Initial
Mailing Address		Email Address
City	Province	Postal Code
( ) Home Phone	( ) Work Phone	( ) Cell Phone

Please register me for the **Resist-A-Ball Certification Workshop**

* In order to receive your certificate, remember to include a copy of your current CPR (must be issued less than one year).

- ❑ **Resist-A-Ball C.O.R.E. Instructor Level ONE***
- ❑ **Resist-A-Ball C.O.R.E. Instructor Level TWO***
- ❑ **Resist-A-Ball Pilates on the Ball ***
- ❑ **Resist-A-Ball Yoga on the Ball ***

Workshop Location (City/Province)	Name of RAB Trainer	Date

Certification Fees

	Workshop Early Bird More than two weeks prior to the workshop.	Workshop Regular Less than two weeks prior to the workshop.	Professional Membership Applicable only if membership is up for renewal.	Exam Rewrite	Total
Professional Member Rate	☐ $150	☐ $170	☐ $49	☐ $50	
Non-Member Rate (new or expired member)	☐ $209	☐ $229	Included in course registration fee.		
* **GST (Goods and Services Tax)** applicable in Quebec, Ontario, Prince Edward Island, Manitoba, Alberta, Northwest Territories, Nunavut, British Columbia, and Saskatchewan. (Applied to location where course or exam is being held).				+ *GST at 5% or + **HST at 13%	
** **HST (Harmonization of Sales Taxes)** applies only to the Canadian provinces of Newfoundland, Nova Scotia, and New Brunswick and includes both GST and PST. (Applied to location where course or exam is being held).				Total	

Method of Payment

☐ Visa	☐ MasterCard	Card number:	Expiry:
☐ Cheque*	☐ Money order*	*Cheque or money order must be enclosed; no post-dated payments will be accepted	

CANCELLATION POLICY

Cancellations received in writing at least two weeks prior to the course date will be charged a $25 (+ Applicable Taxes) Administration Fee.
Refunds will not be issued less than two weeks prior to workshop date.

I have read and agree to abide by the **CANCELLATION POLICY** stated above. (Signature required below)

Signature:	Date:

Mail to:	Online / Fax / Call
Can-Fit-Pro 110-255 Consumers Rd Toronto, ON M2J 1R4	Online: www.canfitpro.com Fax: (416) 493-1756 Call: 1-800-667-5622 x 224 / Local: (416) 493-3515 x 224

Office Use Only

☐ Emailed / Mailed
☐ Course Closed
☐ Exam Closed

☐ Materials Shipped ☐ On-site Registration ☐ Materials Given On-site _____

Date: Employee Initials: PRO Trainer Initial