



• NSCA-CPT Exam Preparation Symposium (EPS) •
•Registration Form• January 6-8, 2011•

Mail completed registration form (with payment) to: NSCA, Attn: Accounting,
1885 Bob Johnson Dr., Colorado Springs, CO 80906 or FAX to 719-632-6367

Name (first name, MI, last name) _____ Member ID _____

Address: _____ Suite/Apt. number: _____

City: _____ State/Province: _____ ZIP/Postal code: _____

Daytime phone: _____ Fax: _____

Email address: _____

SYMPOSIUM FEE: (please check all that apply)

EPS Date: Jan 6-8, 2011 Location: Kirkwood Community College, Cedar Rapids, IA Clinic Code: MC010611

	Early-Bird Registration (cutoff Dec 3, 2010)	Pre-Registration (Dec 4, 2010 – Jan 3, 2011)	On-Site Registration (On-site ONLY – Jan 6, 2011)
NSCA Members	<input type="checkbox"/> \$195	<input type="checkbox"/> \$220	<input type="checkbox"/> \$245
Non-Members (includes a 1 yr professional membership)	<input type="checkbox"/> \$330	<input type="checkbox"/> \$355	<input type="checkbox"/> \$380
Optional Symposia Workbook:	<input type="checkbox"/> \$50 paper version (electronic PDF will be emailed 1 week prior to symposium)		
Total Enclosed:	\$ _____		

Method of Payment:

- Check or Money Order (U.S. funds only) payable to "NSCA"
 VISA MasterCard American Express

Name on Card: _____

Account Number: _____ Expiration Date: _____ CVC Code: _____

X _____
Signature _____ Date _____

Receipt: Email Mail

Refund Policy: Refunds will not be issued unless EPS is canceled by the event host.

Exam Prep Symposium Waiver

In consideration of being allowed to participate in the NSCA Exam Prep Symposium, (including but not limited to) any seminar, clinic, exhibit, or demonstration conducted in connection therewith (the Event) the undersigned attendee hereby expressly waives and releases NSCA its administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises in which the activity takes place from any liability, losses, damages, injuries (including disability or death) actions and all causes of action or claims whatsoever, of any kind or nature, arising from, or in any manner related to, attendee's participation in the Event. This Waiver and Release shall inure to the benefit of the assigns or successors of NSCA and shall be binding upon the heirs or successors of attendee. Attendee specifically understands that attendance at or participation in any activity is at attendee's own and sole risk. Attendee specifically acknowledges his/her experience and capabilities and believes he/she is qualified to participate in any such activity offered by the NSCA. Attendee fully understands that participation in any function or activity set forth herein involves risks and dangers and may result in serious bodily injury, including permanent disability, paralysis, and/or death. Attendee understand that such risks and dangers may be caused by his own actions, or inaction, the actions or inaction of others participating in the activity, the condition in which the activity takes place or the negligence of the releasees, specifically the NSCA and its agents or employees. With full knowledge, the attendee fully accepts and assumes all such risks and all responsibility for losses, costs, and damages incurred as a result of his participation in the Event, of any kind or nature whatsoever. Attendee further agrees that if, despite this release, he or anyone on his behalf makes a claim against any of the releasees named herein, attendee will indemnify, save and hold harmless each of the releasees from any litigation expenses, attorney's fees, loss liability, damage, injury (including disability or death) or cost any of them may incur as a result of any such claim.

Attendee acknowledges that by registering for this Event he/she has read this agreement, fully understands it's terms, understands that he/she has given up substantial rights by signing it, and has signed it freely and without any inducement or assurance of any nature, and intends same to be a complete and unconditional release of all liability to the greatest extent allowed by the law of the state in which such activity is conducted and, further, agrees that if any portion of this agreement is held to be invalid that the balance, notwithstanding, shall continue in full force and effect.

X _____
Signature _____ Date _____

MC010611



• NSCA-CPT Exam Preparation Symposium (EPS) •
•Registration Form• January 6-8, 2011•

Mail completed registration form (with payment) to: NSCA, Attn: Accounting,
1885 Bob Johnson Dr., Colorado Springs, CO 80906 or FAX to 719-632-6367

Kirkwood Community College Recreation Center
6301 Kirkwood Blvd, Cedar Rapids, Iowa 52404

****REGISTRATION: print out and submit REGISTRATION FORM to NSCA by January 3, 2011****

Thursday Jan. 6, 2011

5:00pm-6:15pm	Structure and Function of the Muscular, Respiratory and Cardiovascular Systems	Brian Fisher
6:25pm-7:40pm	Biomechanical Principals	Brian Fischer
7:50pm-9:00pm	Client Consultation and Fitness Assessment	Nichole Holze

Friday Jan. 7, 2011

8:00am-9:50am	Anaerobic and Aerobic Training Adaptations	Brian Fischer
10:00am-12pm	Free Weight and Machine Exercise Technique	Brian Fischers
12:00pm-1:00pm	Lunch	
1:00pm-2:15pm	Weight Training Exercise Prescription	Mark Croy
2:25pm-3:40pm	Aerobic Exercise Prescription	Nichole Holze
3:50pm-5:00pm	Nutrition and Weight Management	Nichole Holze

Saturday Jan. 8, 2011

9:00am-10:20am	Training Special Populations	Mark Croy
10:30am-11:5am	Training Special Populations	Mark Croy
12:00pm-1:00pm	Lunch	
1:00pm-2:00pm	Emergency and Legal Issues in Personal Training	Mark Croy

**** NSCA-CPT Exam will be offered on Sunday January 9th ****

REGISTER online:

http://www.nsca-cc.org/nsca-cpt/register.html?exam_year=2011

Exam Date: **Sunday, January 9, 2011**

Early Registration Deadline: **Friday, October 29, 2010**

Registration Cut-Off: **Friday, November 12, 2010**