



## NETA Fit Fest Kent, OH Kent State University, Kent, OH

Name:		NETA Customer #:	
Address:			
City:	State:	Zip:	
Phone #:		Email:	

**CEC Workshops**

### CEC Workshops Selections \$69 Each

(Register for 3 or more 3 hour CECs and pay only \$59 each!)

PT Hands-On Behavior, Motivation, and Goals Training \$149

Fill in the session name and price for each CEC workshop you are attending.

<b>Friday May 18, 2012:</b> <i>Check-in table opens at 5:30 pm and is located near the main entrance.</i>		
<b>Time</b>	<b>Workshop Name</b>	<b>Price</b>
6:00 pm – 9:00 pm	_____	\$ _____
<b>Saturday May 19, 2012:</b> <i>Check-in table opens at 7:30 am and is located near the main entrance.</i>		
<b>Time</b>	<b>Workshop Name</b>	<b>Price</b>
8:00 am – 11:00 am	_____	\$ _____
11:30 am- 2:30 pm	_____	\$ _____
3:00 pm -- 6:00 pm	_____	\$ _____
<b>Sunday May 20, 2012:</b> <i>Check-in table opens at 7:30 am and is located near the main entrance.</i>		
<b>Time</b>	<b>Workshop Name</b>	<b>Price</b>
8:00 am – 11:00 am	_____	\$ _____
8:00 am – 3:00 pm	_____	\$ _____
12:00 pm –3:00 pm	_____	\$ _____
<b>Total Cost for CEC Workshops (Transfer to Total Event Registration)</b>		<b>\$ _____</b>



## NETA Fit Fest Kent, OH Kent State University, Kent, OH

### Certifications / Specialty Certification Workshops

<u>Certification / Workshop Name / Price</u>	<u>Price</u>
Personal Training Certification / \$349* *Early Bird Rate. Register 30 days in advance. Standard rate: \$399 (Saturday May 19 <sup>th</sup> 8:00 am –5:00 pm & Sunday May 20 <sup>th</sup> , 8 am – 3:00pm)	\$ _____
Group Exercise Certification / \$199* * Early Bird Rate. Register 30 days in advance. Standard rate: \$249 (Saturday May 19 <sup>th</sup> 8:00 am - 4:30 pm)	\$ _____
Pilates Mat Specialty Certification / \$299* * Early Bird Rate. Register 30 days in Advance. Standard rate: \$349 (Saturday May 19 <sup>th</sup> 8:00 am –5:00 pm & Sunday May 20 <sup>th</sup> 8:00 am-2:00 pm)	\$ _____
<b>Total Cost for Certifications / Specialty Certification Workshops</b> (Transfer to Total Event Registration)	\$ _____

### Study Materials

The following manuals/practice exams are recommended for specific workshops.

<u>Manual Name / Price</u>	<u>Quantity</u>	<u>Price</u>
NETA Fitness Professional Manual / \$49 (recommended for GX and PT Workshops)	_____	\$ _____
GX Study Workbook (recommended) / \$25	_____	\$ _____
PT Study Workbook (recommended) / \$25	_____	\$ _____
PT Practice Exam (recommended) / \$10	_____	\$ _____
NETA Pilates Manual (recommended) /\$35	_____	\$ _____
Pilates Practice Exam (recommended) /\$10	_____	\$ _____
<b>Total Cost for Study Materials</b> (Transfer to Total Event Registration)		\$ _____



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### Total Event Registration

<b>Total Cost for CEC Workshops</b>	\$ _____
<b>Total Cost for Certification/Specialty Certification Workshops</b>	\$ _____
<b>Total Cost for Study Materials</b>	\$ _____
Add shipping and handling <b>ONLY</b> ; If you are purchasing study materials (S&H below)	\$ _____
<b>Total cost of registrations and study materials</b>	\$ _____

1. Registration deadline is **Friday May 18, 2012**.
2. Additional discount offers not applicable to CEC workshops.
3. On-site registrations are subject to a \$10 additional fee per workshop.
4. Workshops are subject to cancellation or change. We have a **no refund** policy for all registrations. Credit vouchers available.
5. Registration and payment can be made via web [www.netafit.org](http://www.netafit.org), phone 763-545-2505, fax 763-545-2524 or mail to: **NETA 5955 Golden Valley Road, Suite 240, Minneapolis, MN 55422**.
6. All registrants will receive a confirmation letter in the mail.
7. Event takes place at Kent State University: 1550 Ted Boyd Dr, Kent, OH 44242  
[www.recservices.kent.edu](http://www.recservices.kent.edu)

<b>Merchandise S&amp;H Charges</b>			
<b>Order Total</b>	<b>Amount</b>	<b>Order Total</b>	<b>Amount</b>
Up to \$15.00	\$3.50	\$70.00-\$89.99	\$11.50
\$15.01-\$29.99	\$6.75	\$90.00-\$109.99	\$13.50
\$30.00-\$49.99	\$8.50	\$110.00-\$149.99	\$14.50
\$50.00-\$69.99	\$10.50	\$150.00-& UP	\$15.50

### Payment

**Method of Payment** (complete below)                      **Amount Enclosed \$** \_\_\_\_\_

Check # \_\_\_\_\_   
  Money Order   
    
    

Credit Card # \_\_\_\_\_ Exp Date \_\_\_\_\_ / \_\_\_\_\_

CVC Code \_\_\_\_\_ (last three digits on back of credit card)

NAME AS IT APPEARS ON CREDIT CARD \_\_\_\_\_