



CEC SCRAMBLE 2011
Pilates Professionals' Continuing Education Conference

CONTACT INFORMATION

NAME: _____ COMPANY NAME (if applicable): _____
ADDRESS: _____ CITY: _____ PROVINCE: _____ CODE: _____
PHONE: HOME _____ ALT _____ EMAIL _____

PLEASE INDICATE YOUR PREFERENCE:

Sunday November 13, 2011

SESSION 1 8:00-10:00am
[] Total Body Sculpting/Flexband Level II (Tomo) [] Essential BOSU (Marie)
SESSION 2 10:15-12:15PM
[] Power Paced Fitness Circle (Jo-Anne) [] Mini Stability Ball Workout (Marie)
12:15-1:00pm LUNCH BREAK
Q&A Session and Equipment Demos 1:00-1:30pm
SESSION 3 1:30-3:30pm
[] Rotational Disks on the Mat(Jo-Anne) [] Total Body Toning (Marie)

All workshop hours must be attended in order to receive full continuing education credits.

CONFERENCE PRICING

One Session (2 CECs) \$99
Two Sessions (4 CECs) \$190
Three Sessions (6 CECs) \$240

Number of sessions you are registering for: _____

Registration

Payment MUST accompany your registration. Registration without payment will not be processed. Purchase orders or invoicing are not permitted. Session selections are based on a first come, first served priority. Every session has a maximum number of participants that can be permitted to participate and thereby receive continuing education credits.

CEC SCRAMBLE 2011 - Waiver of Liability: In consideration of accepting this registration I, the undersigned, intend to be legally bound, for my heirs, my executors, administrators and myself, waive and release any and all rights and claims for damages I may have against the Calgary Pilates Centre, the facilities, and all promoters, sponsors and their representatives, successors and their assigns for any and all injuries suffered during the CEC SCRAMBLE 2011 conference.

[] MasterCard [] Visa [] Cheque - Payable to Calgary Pilates

Card # _____ Exp _____

SUB TOTAL: \$ _____ x 1.05 GST = TOTAL OWINGS\$ _____

Name on card _____ Signature* _____

*By signing the application, I agree to the above charges, Waiver of Liability and Photography Release Form

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