



Experience Multiple Movement Combinations designed for a chest deep & deep-water recreational pool And Gentle Stretch, Strength & Range of Motion Exercise Progressions.

Sunday March 11, 2018 from 8am – 4:30pm
Host: Peterborough Sport & Wellness Centre

Join CALA Trainer Dylan Harries to:

1. Experience chest deep and deep-water movement combinations that build from basic to advanced level, designed for recreational mainstream aquafitness classes.
2. Enjoy warm water exercise progressions designed to improve static flexibility, strength, range of motion and to build confidence for participants in a gentle aquatic post rehabilitation environment
3. Earn canfitpro & 8 CALA Continuing Education Credits *Note: Earn & bank CALA CECs even before you are CALA trained or certified!

The Canadian Aquafitness Leaders Alliance provides **top-notch training** and access to up-to-date information for fitness professionals in one on one and group settings. This multipurpose training opportunity is geared to land and water based fitness leaders, yoga instructors, coaches, post rehabilitation specialists, athletes and personal trainers. The full day of workshops is based on **practical application of theory** using an **integrative approach to learning**.

WHERE: Peterborough Sport & Wellness Centre, 775 Brealey Dr, Peterborough, ON K9J 6X4

WHEN: Sun Mar 11, 2018 from 8:00am – 4:30pm includes a community class from 8:05am- 8:55am (Two pool sessions, lots of dry land activity)
Note: We have access to the recreational & warm therapy pools from 8am – 2pm. Be prepared!

WHAT: Earn canfitpro & CALA CECs (you can bank CALA CECs, before you are a CALA Member or CALA trained or certified. Fees include CECs

COST: * CALA Member: \$226 included tax
* Non-member: \$254.25 included tax

No refund for withdrawal from the workshop.

*** PSWC staff register through CALA (Subsidized rate available. Call CALA for details)**

VISA & MasterCard (not debit cards) or e-transfer. Scan & email form to: cala_aqua@mac.com

VISA MasterCard Direct Deposit Amount Paid: \$ _____ (See above for correct fee option)

Card # _____ Exp. Date: (Month / Year) _____

Signature _____

Office Use Only:

Date Processed: _____ Initials: _____ Invoice # _____ Paid: _____ Confirmation Letter: _____

New Member #: _____ Receipt: _____ Promo: _____ Manual mailed: _____