

# REGISTRATION FORM

## canfitpro and CALA Premiere Land Meets Water Event Toronto, ON | November 7-9, 2014 Ryerson University - Recreation and Athletics Centre

Please print clearly and fill in the entire form.  
Use one form per person. You may photocopy for  
additional registrants.

Today's Date: \_\_\_\_\_

### Check if apply:

☐ Previously paid by phone.

Date of phone registration : \_\_\_\_\_

☐ You are re-submitting your form with a signed  
waiver of liability and consent.

## 1 PERSONAL INFO

canfitpro ID: \_\_\_\_\_

☐ Mr. ☐ Mrs. ☐ Miss. ☐ Ms. ☐ Dr. Last Name: \_\_\_\_\_

(It's my new last name; previously: \_\_\_\_\_)

First Name: \_\_\_\_\_ Date of Birth: **MM/DD/YYYY** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov.: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_ This is my: ☐ Home address  
☐ Club address  
☐ New address

**PHONE** Home: \_\_\_\_\_ Business: \_\_\_\_\_

Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Club Name: \_\_\_\_\_

## 2 Select the role(s) that best describes what you do:

- ☐ Owner ☐ Executive/Manager ☐ Pilates Instructor ☐ Fitness Instructor - Cycle  
☐ Director ☐ Fitness Instructor ☐ Yoga Instructor ☐ Fitness Instructor - Aqua  
☐ Co-ordinator ☐ Personal Trainer ☐ Fitness Consumer ☐ Allied Health Professional

## 3 REGISTRATION FEES

Received By:	Toronto 5 Day or CALA Conference Member Discount*	Professional Member (canfitpro & CALA)	Non-Member	Student Membership**
October 10, 2014	<input type="checkbox"/> \$99*	<input type="checkbox"/> \$189	<input type="checkbox"/> \$209	<input type="checkbox"/> \$142**
October 31, 2014	<input type="checkbox"/> \$99*	<input type="checkbox"/> \$219	<input type="checkbox"/> \$239	<input type="checkbox"/> \$165**
On-Site	<input type="checkbox"/> \$99*	<input type="checkbox"/> \$249	<input type="checkbox"/> \$269	<input type="checkbox"/> \$187**

\*If you attended the 2014 Toronto International Fitness and Club Business Conference and Trade Show, or CALA Spring 2014 Conference register for only \$99

\*\* Student documentation required

All prices are Canadian Dollars. 13% HST is extra

## 4 MEMBERSHIP

canfitpro	
Professional Membership	<input type="checkbox"/> \$89
Professional Membership Renewal	<input type="checkbox"/> \$69
Student Membership (student documentation required)	<input type="checkbox"/> \$49
CALA	
CALA Membership	<input type="checkbox"/> \$59

All prices are in Canadian Dollars. 13% HST is extra

## 5 INTENSIVE WORKSHOPS

Note: you are considered a delegate if you are attending the event on  
Saturday, November 8 & Sunday, November 9, 2014.

Session Name:	Member Delegate (canfitpro & CALA)	Member Non- Delegate (canfitpro & CALA)	Non-Member Delegate	Professional Member On-Site (canfitpro & CALA)	Non-Member On-Site
<b>FRIDAY, NOVEMBER 7, 2014</b>					
[100] - 101 - Bender Barre None™ (W/S) & 102 - Aqua Bender Barre None™(W/S)	<input type="checkbox"/> \$199	<input type="checkbox"/> \$239	<input type="checkbox"/> \$219	<input type="checkbox"/> \$259	<input type="checkbox"/> \$259
101 - Bender Barre None™(W/S) - Only	<input type="checkbox"/> \$119	<input type="checkbox"/> \$139	<input type="checkbox"/> \$129	<input type="checkbox"/> \$149	<input type="checkbox"/> \$169
102 - Aqua Bender Barre None™(W/S) - Only	<input type="checkbox"/> \$119	<input type="checkbox"/> \$139	<input type="checkbox"/> \$129	<input type="checkbox"/> \$149	<input type="checkbox"/> \$169

Session Name:	Member Delegate (canfitpro & CALA)	Member Non- Delegate (canfitpro & CALA)	Non-Member Delegate	Non-Member Non-Delegate	Member On-Site (canfitpro & CALA)	Non-Member On-Site
<b>FRIDAY, NOVEMBER 7, 2014</b>						
103- CPR Level A and AED	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$69	<input type="checkbox"/> \$69	<input type="checkbox"/> \$80	<input type="checkbox"/> \$80

## 6 SESSION REQUESTS

Fill in the session code for your first and second requests for each time slot.

**Note:** your session requests will be processed on a space available first come first served basis, based on the date your complete registration is received.

SATURDAY, NOVEMBER 8, 2014		
Session Time	1st Request	2nd Request
8:00 a.m. - 9:15 a.m.	<input type="checkbox"/> [200] - General Session: Making a Difference (L)	
9:30 a.m. - 11:00 a.m.	<b>2</b>   <b>1</b>	<b>2</b>   <b>1</b>
11:15 a.m. - 12:45 p.m.	<b>2</b>   <b>2</b>	<b>2</b>   <b>2</b>
2:00 p.m. - 3:30 p.m.	<b>2</b>   <b>3</b>	<b>2</b>   <b>3</b>
3:45 p.m. - 5:15 p.m.	<b>2</b>   <b>4</b>	<b>2</b>   <b>4</b>

SUNDAY, NOVEMBER 9, 2014		
Session Time	1st Request	2nd Request
8:00 a.m. - 9:15 a.m.	<input type="checkbox"/> [300] The Power of Posture (L)	
9:30 a.m. - 11:00 a.m.	<b>3</b>   <b>1</b>	<b>3</b>   <b>1</b>
11:15 a.m. - 12:45 p.m.	<b>3</b>   <b>2</b>	<b>3</b>   <b>2</b>
2:00 p.m. - 3:30 p.m.	<b>3</b>   <b>3</b>	<b>3</b>   <b>3</b>
3:45 p.m. - 5:15 p.m.	<b>3</b>   <b>4</b>	<b>3</b>   <b>4</b>

## REGISTRATION FORM (2/2)

Reprint **YOUR NAME:**

### 7 REFERRAL

☐ I have never attended a **canfitpro** event.

#### Referred by:

In appreciation for introducing you to our conference in Toronto, if you are new to the event, the person who referred you will receive a \$10 gift certificate for use on any **canfitpro** product or service !

### 8 REGISTRATION PAYMENT (check all that apply)

☐ MasterCard ☐ VISA ☐ Money Order\* ☐ Cheque\*

\*Payable to **canfitpro**. No post-dated cheques. Returned cheques are subject to a \$25 administrative fee. (Please Note: Money Orders and Cheques are not accepted On-Site)

#### CREDIT CARD INFO

Card #: \_\_\_\_\_

Expiry Date: (mm/yy): \_\_\_\_\_

Card Holder (print): \_\_\_\_\_

Authorized Signature : \_\_\_\_\_

### 9 TOTAL FEES

Fill in the totals from each applicable section on this form. Valid cash-value coupons and **canfitpro** credit notes are deducted from the grand total. Original coupons and credit notes must accompany the registration form.

	CAN\$
<b>SECTION 3: REGISTRATION FEES</b>	\$
<b>SECTION 4: MEMBERSHIP</b>	\$
Less Promotional Discount: (if applicable) BRM #: _____ BRM or other discount code _____ NOTE: discount codes cannot be combined	\$
Less Group Discount: (if applicable)	\$
<b>1ST SUBTOTAL:</b> (discounts must be applied at time of payment and cannot be claimed retroactively)	\$
<b>SECTION 5: INTENSIVE WORKSHOP(S)</b>	\$
<b>2ND SUBTOTAL:</b>	\$
Plus 13% HST: (#88581-8328 RT0001)	\$
<b>GRAND TOTAL:</b>	\$

### 10 Assumption of risks and release of liability, waiver of claims and indemnity agreement.

**By signing this document you will waive certain legal rights, including the right to sue. PLEASE READ CAREFULLY**

To: Canadian Fitness Professionals Inc. o/a **canfitpro**, and its Shareholders, Directors, Officers, Employees, Sponsors, Representatives, Independent Contractors, Agents, Members, Volunteers, Affiliated and Associated Legal Entities, Successors and Assigns (herein called the "Organizers").

#### Assumption of Risks

In regard to my preparation for and participation in the **canfitpro** Conference (herein called the "Conference"), including but not limited to the fitness activities and exercise held at the Conference, I am aware that:

a) fitness activities and exercise and the participation in the Conference exposes participants to many risks and hazards, some of which are inherent in the very nature of the training required, the Conference and fitness activities and exercise itself; others which result from human error and negligence on the part of the persons involved in preparing, organizing and staging fitness activities and exercise;

- b) as a result of the aforesaid risks and hazards, I as a participant may suffer serious personal injury (even death) or property loss;
- c) some of the aforesaid risks and hazards are foreseeable, but others are not;
- d) I nevertheless freely and voluntarily assume all the aforesaid risks and hazards, and the possibility of personal injury, death, property damage or loss, resulting therefrom and that, accordingly, my preparation for and participation in the aforesaid fitness activities and exercise and Conference shall be entirely at my own risk; and
- e) I understand that the Organizers, officers, directors, employees, independent contractors, agents, affiliated clubs, sponsors, or volunteers do not assume any responsibility whatsoever for my safety during the course of my preparation for or participation in the aforesaid fitness activities, exercise or Conference.

#### Release of Liability, Waiver of Claims And Indemnity Agreement

I hereby acknowledge and agree, in consideration of being permitted to participate in the Conference, as follows:

- TO WAIVE ANY AND ALL CLAIMS, known or unknown, that I may have or may in the future have against the Organizers.
- TO RELEASE THE ORGANIZERS from any and all liability for any and all personal injuries, loss, damage, expense or injury including death that I may suffer or that my next of kin may suffer resulting from or arising out of my preparation for or participation in the Conference DUE TO ANY CAUSE WHATSOEVER, INCLUDING NEGLIGENCE, BREACH OF CONTRACT, OR BREACH OF ANY STATUTORY OR OTHER DUTY OF CARE, ON THE PART OF THE ORGANIZERS, AND ALSO INCLUDING THE FAILURE ON THE PART OF THE ORGANIZERS TO SAFEGUARD OR PROTECT ME FROM THE RISKS, DANGERS AND HAZARDS OF FITNESS ACTIVITIES AND EXERCISE REFERRED TO ABOVE.
- TO BE LIABLE AND TO HOLD HARMLESS AND INDEMNIFY THE ORGANIZERS from any and all liability for any damage to property of, or personal injury to, any third party, resulting from or arising out of my preparation for and participation in the Conference.
- The Organizers may videotape, audiotape and/or photograph me and retain the rights to use these items and may employ any or all of these for all commercial and non-commercial purposes without payment of any kind to me and without further notice to me or permission from me.
- Each section, part, term and/or provision of this Agreement will be considered severable and fully-enforceable. In the event that any one or more of the provisions contained herein shall, for any reason, be held to be invalid, illegal or unenforceable in any respect, such invalidity, illegality or unenforceability shall not affect any other provisions of this Agreement, but this Agreement shall be construed as if such invalid, illegal or unenforceable provisions had never been contained herein.
- This Agreement shall be effective and binding upon my heirs, next of kin, executors, administrators and personal representatives in the event of my death or incapacity.
- This Agreement and any rights, duties and obligations as between the parties to this Agreement shall be governed by and interpreted solely in accordance with the laws of Ontario, Canada. Any litigation involving the parties to this Agreement shall be brought solely within Ontario, Canada and shall be within the exclusive jurisdiction of the Courts of Ontario, Canada.

In entering into this Agreement I am not relying upon any oral or written representations or statements made by the Organizers with respect to the safety of fitness activities and exercise and the preparation for and the participation in the Conference, other than what is set forth in this Agreement.

Cancellations for conference and/or Intensive workshops must be received in writing (fax/mail/e-mail) to **canfitpro**.

Cancellations received more than 60 days prior to the conference date will not incur a cancellation penalty.

Cancellations received between five and 60 days prior to the conference date will be charged an administration fee of 15% of the total fee (plus applicable taxes).

No refunds will be issued for cancellations received less than five days prior to the conference.

No refunds or credits will be given for no-shows, partially used registrations, on-site registrations, or memberships fees.

#### Session change fee

Please select your sessions carefully. If you would like to add or change a session after registering a change fee of \$5 per session will apply (up to a max of \$25 for 5 or more changes).

I provide **canfitpro** permission to communicate with me about their products, services, and sales offers via electronic formats.

I HAVE READ AND UNDERSTAND THIS AGREEMENT AND I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM ASSUMING CERTAIN RISKS AND WAIVING CERTAIN LEGAL RIGHTS WHICH I MAY HAVE AGAINST THE ORGANIZERS.

Date (mm/dd/yy) \_\_\_\_\_

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Signature of Guardian (if necessary)

Participants under the age of eighteen (18) years require guardian's signature above. This Agreement must be completed in full, dated and signed before being allowed to participate in the Conference.