## **In-Person CALA Workshops**



Complete your certification with the help of **3 Booster Workshops** with Katherine McKeown at Burnamthorpe Community Centre, Mississauga, ON



## 1. Fri. April 5th

6 pm - 8 pm - VWT Exam Prep Booster

8:15-9:45 pm – Written Exam – this is a NEW multiple choice open book format

CEC's: earn 2 CALA & 1 canfitpro

## 2. Sat. April 6th

9:30 am - 5:30 pm - GAF Booster

The opportunity to complete & submit your GAF Assignment & practice for your GAF Practical Assessment. Be prepared to get in the pool.

**3 pm – 5:30 pm – GAP Practical Assessment** (this block provides available to complete your 30-min GAF Practical assessment – or continued practice)

CEC's: earn 6 CALA & 3 canfitpro

## 3. Sun April 7<sup>7h</sup>

9:30 am - 5:30 pm - HW Booster

The opportunity to complete & submit your HW Assignment & practice for your HW Practical Assessment. Be prepared to get in the pool.

2:30 pm – 3:30 pm – HW Practical Assessment (this block is available to complete your HW Practical Assessment – or continued practice)

CEC's: earn 6 CALA & 3 canfitpro		
Please type or print in black ink. City obeside your name (below)	Mississauga Staff are subsidized. You MUST add COM STAFF	
NameAddress	Renew Now  \$59 + 1	— tax
City	Tel. h	
Prov	Cell	
Postal	Tel. w	
Email 1	Email 2	
E-transfer to cala_aqua@mac.com	Amount Paid	
WAIVER AGREEMENT: Please check ✓	hat you agree to the following WAIVER.	
Lagree to forever release, discharge	ılly indemnify and save harmless, the Canadian Aquafitness Leaders Allian	ce Inc
(CALA), the facilities, and all promoters, sp all claims, demands and expenses whatsoe death. I verify that I have been involved in a disability, physical ailment nor am I taking a	nsors and their representatives and successors, and their assigns from any rer on account of damage to or loss of property, physical or mental injury or physical training program and that I am physically fit and do not suffer from my medication that would cause me harm or limit my participation. I hereby and agree to the above and that I am of legal age to execute this form as a legal age to execute this form as a legal age.	and any affirm

Email to cala\_aqua@mac.com You can also use the Adobe Acrobat "Fill and Sign" feature to complete the form

On rare occasions, it is necessary to shift CALA Training dates, times, and topics. Thank you for understanding.