



HFPA SHORT COURSE & CONTINUING EDUCATION REGISTRATION FORM

2010

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NOTE: The Registration Form for the National Diploma in Exercise Science can be obtained from your Dubai HFPA office, downloaded from: www.coredirection.com or obtained from HFPA head office: Tel 04 3626385; email: info@coredirection.com

- It is recommended that participants in continuing education programmes hold at least the National Diploma Part 1 in Exercise Science or equivalent.
- For those with no exercise science qualification the Basics in Exercise Science course serves as an introduction to anatomy, physiology and principles of training. Registration for this course is a pre-requisite for acceptance onto any of the continuing education courses.
- The CONTINUING EDUCATION courses all carry Continuing Education Credits for graduates.

This form, together with proof of payment, must be faxed or delivered by hand to your HFPA Regional Office.

For Dubai courses deliver to Core Studio: Att: Charlotte Mathers

Note:

- **A 500.00dhs Booking Fee is required to register for any course. The balance of the course fee must be paid in full on or before the registration deadline.**
- **Payment over 2 months may be arranged for students registering for the Basics in Exercise Science together with a continuing education course. In this case the total course fee is divided into 2 equal payments with the Booking Fee deducted from the final instalment.**

COURSE: _____ COURSE DATE: _____ VENUE: _____

COURSE REFERENCE NO: _____ REGISTRATION DEADLINE: _____

Title: _____ Surname: _____ First Names: _____

Passport Number: _____ Date of Birth: _____

Residential Address: _____ Code: _____

Postal Address: _____ Code: _____

Tel No: (W) _____ (H) _____ (Fax) _____

Cell Phone: _____ email: _____ Occupation: _____

Name & Address of close friend or relative not living with you: - _____

_____ Tel: _____

Have you studied/attended courses with HFPA prior to this course? YES NO

If you are a current HFPA student state your student number – Student No. _____

Where did you learn about HFPA? i.e. press advert, sms, flyer, word of mouth, career day, other: _____

Do you require any further information?

Course Fees: A minimum number of participants are required for each course to commence.

- o If a course is cancelled by HFPA you will receive a refund of all monies paid for the course, incl. booking fee.
- o Please register early to secure your place.

COURSE TITLE	FULL FEE	BOOKING FEE TO BE SUBMITTED WITH REGISTRATION FORM (NON REFUNDABLE)	FULL FEE PAYABLE ON OR BEFORE REGISTRATION DEADLINE	COURSE REFERENCE NUMBER
<u>THE BASICS OF EXERCISE SCIENCE</u>	AED2500	AED500	AED 2500 + AED250 exam fee	BES
<u>STUDIOBALL 1 & 2</u> Inc. Manual & Txt Book	AED3000	AED500	AED3000	STB12
<u>SPORTS NUTRITION</u>	AED2000	NA	AED 2000	SN
<u>PILATES (Level 1)</u>	AED3500 +AED 250 Exam fee	AED1000	AED3750	PL1
<u>PILATES (Level 2)</u>	AED3500 +AED 250 Exam fee	AED1000	AED3750	PL2
<u>BOSU BALL</u>	AED1500	AED500	AED1500	BB
<u>GROUP FITNESS WITH BASICS OF EXERCISE SCIENCE</u>	AED4000	AED1000	AED4500 + AED250 exam fee GF + AED250 exam fee Basics.	GFBS
<u>GROUP FITNESS ONLY</u>	AED2500	AED1000	AED2750 Plus AED250 exam fee	GF
<u>PRE & POST NATAL</u> Inc. Manual & Textbook	AED1800	AED500	AED1800	PPN
<u>STUDIOCYCLE</u> Inc. Manual	AED2000	AED500	AED2000	SC
<u>CANCER WELLFIT</u>	AED3000	AED500	AED3250 Exam fee AED250	CWF
<u>AQUA</u>	AED3000	AED500	AED3000	AQ
<u>KIDS DEVELOPMENT</u>	AED1500	AED500	AED1500	KD
<u>1st AID/CPR COURSE</u> <u>CPR ONLY</u>	AED550	AED550	AED550	1ACPR CPRR
<u>STUDIOFIT</u>	AED2000	AED500	AED2000	SF
<u>SPORTS MASSAGE</u> Incl. Manual & Text Book	AED2500	AED500	AED2750 + R250 for exam fee	SM
<u>Health & Fitness Management</u>	AED3500	AED500	AED3500	HFM
<u>Coaching Science</u> As 'add-on' to Diploma in Ex. Sc	AED1500	NA	AED1500	CS

DETAILS OF PAYMENT

COURSE: _____ **COURSE REFERENCE NUMBER:** _____
This COURSE REFERENCE NUMBER must be used with your surname and region as the reference for bank deposits and in all correspondence concerning this course
e.g SmithSCDXB (Smith registering for StudioCycle Dubai)

A **BOOKING** fee of AED500.00 must accompany this registration form in order to secure your place on the course. This fee will be refunded only if the course is cancelled by HFPA, otherwise it is non-refundable.

The balance of the course fee must be paid on or before the deadline for registration (*date on page1*).

Banking Details:
National Bank of Abu Dhabi:
Account Number: 6201558588
Branch Code: NBADAEAMOEO
Mall of the Emirates

Please register me for the above course.

I enclose proof of payment for the **full fee** of AED _____ (cash, cheque, internet transfer, credit card) (tick) **OR**

I enclose proof of payment of my **booking fee** of AED _____ deposited into the above account on _____ (**date**) and I undertake to pay the **balance** of AED _____ on or before the deadline for the registration.

Signed: _____ Date: _____

CONDITIONS OF ACCEPTANCE

CANCELLATIONS:

- The AED500.00 **BOOKING** fee applies specifically to the course as stated on this registration form and is non-refundable unless the course is cancelled by HFPA.
- The full course fee is payable before commencement of the course. No cancellations will be accepted after commencement of the course, i.e. full fee is payable according to the contract signed and no refunds will be given.
- Payment in 3 consecutive monthly instalments is permitted only when registering for the Basics in Exercise Science together with a Continuing Education Course (*See note on page 1*). Instalments must be paid on or before the 7th of the month in which they are due. Late payment or non-payment in any one month will incur an administration fee of AED150.00. No cancellations will be accepted, i.e. full fee is payable according to the contract signed and no refunds will be given.
- Study notes are not returnable and are subject to normal copyright restrictions.
- No exceptions will be made to this cancellation policy.

EXAMINATION FEES – Applicable where indicated on the list of Course Fees.

Note: Examination fees are payable in advance. All supplementary examinations will be charged at 250dhs per exam.

TO BE READ AND SIGNED BY ALL APPLICANTS:

I have read and understand all the conditions of acceptance as set out above.

I understand the contract I have entered into with HFPA and acknowledge that the terms are binding.

Signed: _____ Date: _____

WHERE THE APPLICANT IS A MINOR, a parent or guardian must complete the following.

I, _____ parent/guardian of _____

guarantee payment of the full fee of AED _____ in accordance with the conditions set out above.

Address: _____ Code: _____

Tel: () _____ P/P No. _____

Signed: _____ Date: _____