



Name: _____ Email: _____
Address: _____
City: _____ Province: _____ Postal Code: _____
Phone: _____ (h) _____ (w) _____ (cell)

Voluntary Self-Declaration:

Are you of Aboriginal descent? Yes No If yes, are you: Status Non Status Metis
I am between the ages of: 16-19 20-29 30-39 40-49 over 50
What other certifications do you hold? YMCA Can-Fit Pro CFES CEP/CSEP CPT ACE
 WaterART CALA NIA Pace Stott Pilates Yoga Alliance
Do you prefer to receive SPRA Fitness correspondence by: Email Paper Mail

Please ensure all documents and fees are sent in at the same time. You will need to include:

- A photocopy of your **Practical Evaluation**, signed and completed by an SPRA Trainer
- A photocopy of your **CPR and Standard First Aid Level B or C** Certificate. The certificate must be current and within 2 years of date of issue.
- Certification Fee of \$70.00 – This is a one year Certification from January 1st to December 31st
- Certification Fee of \$65.00 – This is a one year Certification from July 1st to December 31st
- Certification Fee of \$45.00 – This is a one year Certification from October 1st to December 31st
- Visa MasterCard Cash Cheque (Please make all cheques payable to SPRA)

Card Number: _____ Expiry Date: _____

Note: A \$2.50 fee will be charged to all credit card transactions

By signing this form you are giving SPRA permission to post your name and place of residency on the SPRA website and to distribute to individuals looking for SPRA Certified Fitness Leaders in the Province of Saskatchewan.

Signature: _____ Date: _____

Upon receipt of the above information and fees, your Certification will be effective until December 31st. Forms can be mailed to our office or faxed to (306) 780-9257. If you have any questions, please contact SPRA at 1-800-563-2555.

S:\2009-10 Fitness & Physical Activity (210)\Fitness\Forms and Exams\Exams and Module Forms\Certification Form for New Leaders.doc

