



**ACADEMY**  
of MEDICAL PROFESSIONS

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## **GROUP FITNESS & PERSONAL TRAINING CERTIFICATIONS**

This 10 week Group Fitness and/or 10 week Personal Training Certification will provide you national certifications through AFAA (Aerobics and Fitness Association of America). This program is designed to teach you the skills you need to successfully enter these professions on a full-time or part-time basis. We will help you to change the lives of others while you make money doing what you love.

As a Group Fitness Instructor, you will be able to effectively lead any type of group exercise program. This program, which also includes CPR and First Aid certifications, is the first level of certification you will need order to start your new career. You can work in any type of fitness facility including: Assisted living and colleges, even working with children or working with kids involved with sports. Some types of group fitness include: Yoga, Pilates, Zumba, boot camp, interval training, step aerobics, water aerobics, Spinning, and more. As a Personal Trainer, you n choose to work independently with clients for yourself or choose to work at a fitness facility where they provide you the clientele. If you are looking to change one life at a time and work closely with a client, this is a great career. Most group exercise instructors are also personal trainers and do a little bit of both to supplement their income.

Some of the skills you will need include: Excellent communication skills, creativity, knowledge of nutrition and fitness do's and don'ts which are taught in programs like ours. This is a career that is constantly changing, so continued education will be essential, which can be accomplished by attending conferences, online resources, health and nutrition materials such as magazines, reports, and books. You will be required to keep up with credits towards your certifications every year.

This program will provide you all the skills necessary to start teaching and training, passing the certifications, preparing your resume, and finding work. Choose to take Personal Training Certification or Group Fitness, or both.

If you complete the course with a satisfactory grade, you will receive a Certificate of Completion, a Letter of recommendation, a list of companies in the field with web site addresses and phone numbers, and we would be happy to provide personal references. Our instructors are professionals in the industry and can offer you the benefit of their knowledge and experience.

# **GROUP FITNESS & PERSONAL TRAINING COURSE DESCRIPTION**

This program is held 1 night week for 10 weeks for each program. The lectures will be approximately 2 hours long in duration and provides the following training:

- **Group Fitness: Theory & Practice-** This 10 week course is offered both locally in the classroom setting or through live webinar, or students can watch the recorded lectures anytime. There are 2 hour lectures once per week. Online students will be assigned an online instructor available to answer questions. Whether taking in the classroom or online, all homework, exercises, activities and chapter tests are taken online. This program will train you in the essentials of exercise and nutrition, physiologic aspects of exercise, safety, how to teach, and business skills and legal responsibilities, and more. At the end of the program, you will sit for your national certification through AFAA, included in the fee.

- **Personal Fitness Training: Theory & Practice-** This 10 week portion of the course offered in the same format as the Group Fitness. The focus of this training is to understand physiology and kinesiology, how to properly do a health screening, muscular strength and endurance, cardiorespiratory programming, working with special populations, weight management, behavior modifications and professional responsibilities and business aspects. CPR, First Aid and AED training are required for any job in this field, and will be offered as part of this curriculum at the end of the training period along with the national boards' exams through AFAA, included in the fee.

Everything you need to obtain gainful employment, obtain your own clients, start your own business will be taught in this program. Our instructors have over 20 years experience in the fitness industry and will be a continuing support system as you move on after graduation and certification.

## **TEXTBOOKS SUPPLIED FOR THIS PROGRAM**

- Fitness: Theory & Practice and Practice Test.
- Personal Fitness Training: Theory & Practice; and Exercise Standards & Guidelines Manual

## **CERTIFICATIONS AWARDED IN THIS PROGRAM**

- Group Exercise certification
- Personal Training certification
- First Aid
- CPR
- AED

# ENTRANCE REQUIREMENTS

All applicants must be 18 years of age at the time of certifications. A high school diploma or GED equivalent is also required at time of certifications.

## ATTENDANCE POLICY

The attendance policy set forth by the Academy of Medical Professions is strictly enforced. Students are expected to attend 100% of all local lectures or scheduled webinar. Students whose attendance drops below 70% (not withstanding mitigating circumstances), may be dis-enrolled from the program. Missing a lecture or scheduled webinar must be preapproved by the instructor and must be made up to graduate. OUR GOAL: NO STUDENT LEFT BEHIND

## STANDARDS OF PROGRESS

Students whose academic average drops below 70% will be placed on academic probation. We will work with the student to develop an action plan for success, to include specific goals and target dates. If the student is unsuccessful in meeting the goals and target dates of the action plan for success, the student will be subject to academic dismissal. If a student misses more than 3 live classes and does watch the recorded lectures, or if an online student fails to provide weekly contact with the instructor via email for more than 3 weeks, the student will be subject to academic dismissal with no refund.

## REFUND POLICY

1. You may terminate the Enrollment Agreement or training at any time. If you do so, you must inform **the school, not the instructor in writing**. Termination will become effective upon receipt of the written notice. Refund will be based on notification week corresponding with your course assignments/week associated with start date of the program.
2. If you terminate within three days of enrolling, provided you have not commenced training, you will receive a refund of the money paid to the school, minus \$450 for the course books, unless they are returned unused. **The \$300.00 application fee in nonrefundable**. If no unused books are returned, the total subtracted from the refund will be \$750.00. If all materials are returned, only the application fee will be subtracted.
1. 3. If you terminate within the first 3 weeks, you will receive a prorated refund equal to the unused portion of monies received from your last day of attendance, or week corresponding with your course assignment, less the application fee of \$300.00, the book fee of \$450.00 for course books. **If you terminate any time after week 3, there will be no refund. If you are paying a payment plan, the balance will be effective as of drop date, 30 days to pay in full or sent to collections**

# **SCHOOL CALENDAR**

## **RECORDED AND ONLINE CLASSES**

Students wishing to take the online courses by watching the recorded classes may start at **any time**.

## **LIVE WINTER SCHEDULED RECORDINGS**

**Personal Training (first 10 weeks) & Group Fitness (second 10 weeks)**

February 28, 2017 Tuesdays

6:00-8:00PM

## **LIVE FALL SCHEDULED RECORDINGS**

**Personal Training (first 10 weeks) & Group Fitness (second 10 weeks)**

October 10, 2017 Tuesdays

6:00-8:00PM

\*\*\*GI Bill recipients follow different guidelines. If you are a GI Bill student please contact our office for more details\*\*\*



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## GROUP FITNESS & PERSONAL TRAINING ENROLLMENT AGREEMENT

(PLEASE PRINT, MAIL, EMAIL OR FAX REGISTRATION FORM TO ABOVE ADDRESS)

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ (H) \_\_\_\_\_ (C)

E-MAIL: \_\_\_\_\_

ONLINE/CORRESPONDENCE START DATE: \_\_\_\_\_

WHERE DID YOU HEAR ABOUT OUR COURSES? Adult Education Brochure/Website

IF FROM AN ADULT EDUCATION OR COLLEGE BROCHURE PLEASE LIST WHICH ONE: Mid-Maine Regional Adult Community Education

### PAYMENT METHOD

\*\*\*\*Please make checks payable to the Academy of Medical Professions\*\*\*\*

\$300.00 non-refundable enrollment fee is already included in the price

#### SINGLE PAYMENT

#### **CIRCLE ONE**

- \$3,000** Group Exercise & Personal Training All-Inclusive program
- \$1,500** Group Exercise Only All-Inclusive Program
- \$1,500** Personal Training Only All-Inclusive Program

#### VOUCHER PAYMENT

#### **CIRCLE ONE**

- \$3,000** Group Exercise & Personal Training All-Inclusive program
- \$1,500** Group Exercise Only All-Inclusive Program
- \$1,500** Personal Training Only All-Inclusive Program

**VOUCHER PAYMENTS I.E. GOODWILL, DEPT OF LABOR, VA, MYCAA, ETC.**

**NAME OF ORGANIZATION PAYING AND CONTACT INFORMATION:**

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## PAYMENT PLANS

(Finance Fees Included)

### PAYMENT PLANS:

#### **CIRCLE ONE**

#### **Group Fitness & Personal Training together:**

**\$3,200      \$500 Down, \$50 weekly until paid in full.**

**\$3,100      \$500 Down, \$400 **monthly** until paid in full.**

#### **Group Fitness OR Personal Training (single course):**

**\$1,700      \$500 Down, \$75 weekly until paid in full**

**\$1,600      \$500 Down, \$400 **monthly** until paid in full.**

### CONTRACT AGREEMENT

I, \_\_\_\_\_ hereby agree to the above mentioned terms of the program. I agree to the payment plan chosen above and I have read and understand the REFUND POLICY and STANDARDS OF PROGRESS for this course and agree to its terms. I agree that if I have a payment plan, that I will keep it in good standing, and that if my account is sent to collections, I am responsible for the legal fees, late fees, and payment plan I have agreed to: SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

#### **(THIS INFORMATION IS ONLY NEEDED IF USING PAYMENT PLAN)**

SS# \_\_\_\_\_ DRIVER'S LICENSE # \_\_\_\_\_ STATE \_\_\_\_\_

### PAYMENTS MADE BY CREDIT CARDS

CREDIT CARD # \_\_\_\_\_

EXPIRATION: \_\_\_\_\_ SECURITY CODE: \_\_\_\_\_ TYPE OF CARD: \_\_\_\_\_

NAME AS IT APPEARS ON CARD: \_\_\_\_\_

ADDRESS WHERE CARD IS SENT IF DIFFERENT FROM REGISTRATION FORM: \_\_\_\_\_

#### **(Check One)**

**DEPOSIT** Amount \$ \_\_\_\_\_ Date to take out deposit: \_\_\_\_\_

**(OR)** Payment in **FULL** \$ \_\_\_\_\_ Date to take out the full payment: \_\_\_\_\_

#### **PAYMENT PLANS:**

**WEEKLY** Amount \$ \_\_\_\_\_ Date to begin payments: \_\_\_\_\_

**(OR)** **MONTHLY** Amount \$: \_\_\_\_\_ Date to begin payments: \_\_\_\_\_