



### Course Details

Course Name \_\_\_\_\_ Dates \_\_\_\_\_  
 \_\_\_\_\_ Venue \_\_\_\_\_

### Fitness Professional

Surname \_\_\_\_\_ Address \_\_\_\_\_  
 First Name \_\_\_\_\_  
 D.O.B \_\_\_\_\_  
 Age on the 31/08/2011 \_\_\_\_\_  
 Nationality \_\_\_\_\_  
 Mobile Number \_\_\_\_\_ Post Code \_\_\_\_\_  
 Home Number \_\_\_\_\_  
 Email \_\_\_\_\_

### Qualifications

Current Qualifications (please tick)	✓	Date
Full Level 1 (1-4 GCSEs A-C/NVQ 1/ Vocational Certificate)		
Full Level 2 (5 or more GCSEs A-C/ First Diploma/ NVQ 2)		
Full Level 3 (2 or more A Levels/ National Diploma/ NVQ3)		
Level 2 CYQ Certificate in Fitness Instructing Gym (inc EFK)		
Other		

### Additional Info.

Have you been a resident in the European Economic Area for the past three years? Yes  No   
 Please state how you heard about us? (Google, newspaper etc) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please make all cheques payable to Fitness Qualifications Ltd and send with a completed booking form to:  
 Fitness Qualifications, PO Box 1142, Longstanton, Cambridge, CB24 3WA  
 Please note that all payments are non-refundable.

### FQ Office Use only

Date received				Payment received		
Confirmation sent - date				Payment outstanding		
Confirmation REF				Invoice sent		
Under 19 LSC		19+		ACER		Staff Int