



FOR YOUTH DEVELOPMENT  
SOCIAL RESPONSIBILITY  
HEALTHY LIVING

# Healthy Lifestyle Principles Certification

Friday, February 10, 2012  
5:30pm - 9:30pm

## Carl and Linda Grubb Family YMCA

609 Trindale Rd. Trinity, NC 27370  
336-861-7788 [mmorgan@hpymca.org](mailto:mmorgan@hpymca.org)

<b>Registration Fee:</b>	<ul style="list-style-type: none"><li>\$40 Registration Fee</li></ul>
<b>Prerequisites:</b>	<ul style="list-style-type: none"><li>Must be over 18 &amp; Hold a current CPR Certification</li></ul>
<b>Bring:</b>	<ul style="list-style-type: none"><li>Notebook &amp; YMCA Healthy Lifestyles Principles Manual (optional) (To order the manual call the YMCA Program Store at 1-800-747-0089. Cost: \$27.00). We provide some manuals to share during class.</li></ul>

This course is a basic-level prerequisite for all YMCA of the USA Health and Fitness certifications. Information includes: effective leadership, physical activity, lifestyle principles & program safety guidelines. The course also covers the YMCA mission, philosophy, and national program training and certification system.

**YMCA Healthy Lifestyle Principles** ——— Friday, February 10, 2012 ——— **5:30pm - 9:30pm**

Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Address: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Please make checks payable to: Grubb Family YMCA PO BOX 170 Trinity, NC 27370  
For more information contact Meredith Morgan @ [mmorgan@hpymca.org](mailto:mmorgan@hpymca.org).

Note: In consideration of being permitted to utilize the facilities, services and programs of the YMCA for any purpose including, but not limited to, observation or use of the facilities or equipment, or participation in any off-site programs affiliated with the YMCA, the undersigned for himself, herself and any personal representatives, executors and administrators, WAIVE, RELEASE, DISCHARGE AND COVENANT NOT TO SUE the High Point YMCA, their directors, officers, employers and their agents for any and all injuries and other damages which he/she may suffer in connection with his/her participation in the program or any other activities."

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Reviewed by legal counsel 9-12-06