

Host Application National Strength and Conditioning Association®

The Exam Prep Live Clinics (EP Clinics) are 2-day clinics offered as a collaborative effort between the NSCA and the Host. The NSCA does not cover costs for facility use or audio-visual equipment necessary for presentations. Requests for EP Clinics must be made at least 4 months in advance.

ease check the Exam Prep Live Cli	nic you would like to host:	☐ CSCS ☐ NSCA-CPT
Host Contact Information	1	
lost School or Organization	Department	
ontact Name	Job Title	1
Sittact Name	Job Hile	
lost Site Mailing Address	City	State, Zip Code
none	Email	Host Website (if applicable)
hysical Location for EP Clinic		
reet Address	City	State, Zip Code
uilding Name	Room No. Webs	ite for Campus Map
ate(s) Requested (minimum of 4 months	in advance):	
/hat is the capacity of the instructional ar	rea? (min 20; max 50 preferred)	
Does the instructional area have a projector and screen ¹ ?		☐ yes ☐ no
Will there be access to a weight training area and/or equipment?		□ yes □ no
Are you or your staff interested in being part of the instructional team ² ?		☐ yes ☐ no
ow many registrants from your facility do	you estimate will participate?	
colleges/Universities: Are you an NSCA Ed	ucation Recognition Program (ERP) ³ ?	☐ yes ☐ no
¹ ED Clinic host requirements include the n	rovicion of audio vicual aquipment	

EP Clinic host requirements include the provision of audio/visual equipment

² All instructors are contracted following approval through an application process

³ Information about ERP can be found at <u>www.nsca.com/Programs/Education-Recognition-Program</u>



Application Agreement

This application will be reviewed and you will be contacted to discuss the specifics within 1-3 weeks. If approved, the NSCA will provide a formal agreement to host an EP Live Clinic.

If approved, I understand that a cancellation may occur if a minimum of 8 participants are not registered 3 weeks prior to the event.

ost Signature			Date
IRST TIME APPLICANTS: PLEA	ASE PROVIDE THE FOLLO	OWING INFOR	RMATION:
ne EP Live clinics include a Juipment is required.	hands-on practical s	ection whe	re access to various assessment and training
Please check the equipme	nt you have available	e and identi	fy the number of each:
For CSCS, NSCA-CPT			For NSCA-CPT <i>Only</i>
Necessary	Optional		☐ Calipers #
			D DI I Du Coff- #
D Barbells #	☐ Plyo boxes	#	☐ Blood Pressure Cuffs #
•			☐ Tape measures #
☐ Barbells #	☐ Med Balls		

Please Return Completed Application To:

Examprep@nsca.com

OR

National Strength and Conditioning Association Attn: Exam Prep Manager 1885 Bob Johnson Dr. Colorado Springs, CO 80906

OR

Fax: 719-632-6722, Attn: Exam Prep