

NAFTA Certification Exam Candidate Compliance Statement



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Please fill in the required fields below to be registered
for the Group Exercise Instructor Certification Exam

NAFTA ID# _____

Name: _____

Street Address: _____

City, State, Zip Code: _____

Email Address: _____

Telephone Day () _____ Evening () _____

I have read and agreed to abide by NAFTA's examination policies as stated in GEI Candidate Handbook and available for download at www.naftafitness.org

Signed: _____ Date: _____