

REPs UAE REGISTRATION FORM

(i) IMPORTANT - PLEASE READ THIS BEFORE YOU START!

To successfully complete your application, you MUST HAVE the following before you start. Any missing parts will delay the processing of your application.

✓ Fitness Education Certificate

Entry level and most relevant certificate & degree transcript (if applicable) to be submitted. You can also submit your current fitness industry specific CV which will help with the application process.

✓ First Aid / CPR Certificate

Up to date First Aid/CPR Certificate is required.

✓ Passport Size Photo

Required for ID Card.

✓ Payment – AED400 per year

Before REPs can complete your application, payment must be made. (cash, cheque or debit/credit card)

Registration Period:

Registration period is for 12 months and expires on the last day of the month.

SECTION 1: PERSONAL DETAILS IMPORTANT: *INDICATES FIELDS WHICH ARE MANDATORY FOR THIS SECTION. INCOMPLETE INFORMATION WILL DELAY PROCESSING
*FULL NAME:
*GENDER:
*NATIONALITY:
*DATE OF BIRTH:
*ADDRESS:
*EMAIL ADDRESS:
*PHONE (MOBILE):

SECTION 2: CURRENT JOB TITLE

Register Of Exercise Professionals UAE Office 218, Building 7, Gold and Diamond Park Al Quoz, PO Box 643590, Dubai, UAE

Telephone: +971 4 340 7407

Website: www.repsuae.com | Email: info@repsuae.com







SECTION 4: Please check (✓) the level(s) of recertificates provided.	egistration for which you are applying. REPs will dete	rmine your final level based on
LEVEL 1	LEVEL 2	LEVEL 3
(a) Assistant Instructor	(a) Group Fitness Instructor	(a) Personal Trainer
	(b) Group Fitness Instructor (Freestyle)	(b) Pilates Instructor (Mat)
	(c) Gym Instructor	(b*) Pilates Instructor (Comprehensive)
	(d) Aqua Fitness Instructor	(c) Yoga Instructor
	(e) Children's Fitness Instructor	
NAME OF COURSES (QUALIFICATIONS)	COURSE PROVIDER NAME OF INSTITUTION	DATE COMPLETED (MM/YYYY)
(QUALIFICATIONS) SECTION 6: First Aid / CPR		
(QUALIFICATIONS) SECTION 6: First Aid / CPR Is your CPR Up to date? SECTION 7: PROFESSIONAL	YES, expiration date:	(MM/YYYY)
(QUALIFICATIONS) SECTION 6: First Aid / CPR Is your CPR Up to date? SECTION 7: PROFESSIONAL Please check one: Are you interest	YES, expiration date: LIABILITY INSURANCE	(MM/YYYY) NO iners and Fitness Instructors?
(QUALIFICATIONS) SECTION 6: First Aid / CPR Is your CPR Up to date? SECTION 7: PROFESSIONAL Please check one: Are you interest	YES, expiration date: LIABILITY INSURANCE sted to avail of our liability insurance for Personal Train NO nsurance form or for online applications, click here to the step of	(MM/YYYY) NO iners and Fitness Instructors?

SECTION 9: TERMS AND CONDITIONS

I wish to apply for REPs registration and agree (please read carefully):

- To follow REPs Code of Ethical Practice (a copy can be downloaded at www.repsuae.com) and to be bound by any REPs complaints process.
- That all information provided on this form is accurate and true.
- That REPs has permission to contact any third party to verify any details of my registration application. To also allow to pass on any contact details to third parties that provide services, and for them to contact me.
- To undertake any audits or reviews REPs may undertake to verify my level of registration and/or competencies.
- To allow REPs to disclose to third parties my registration status, and any reasons for non-registration.
- To undertake any identified training or assessment at my own cost, which REPs recommends as needed to gain entry on to REPs register.
- To make payment of the registration fee to REPs, payment is for application, not acceptance. Refunds are not given for unsuccessful registrations.
- That all online forms completed in my name that correctly provide my date of birth and email address will be
- To undertake sufficient ongoing education (Continuing Professional Development). Currently 10 CPD Points are required each registration year.
- To maintain a current email address at all times, and receive all email communications from REPs.
- All payments for registration are for 12 months from the date of certification, and refunds are not given for change of mind, unsuccessful registration, or failure to meet registration standards.
- This agreement is between the applicant as detailed in section 1, and the UAE Register of Exercise Professionals limited.

By signing h	nere I agree to t	the terms and	l conditions above.
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Signature:	Date:
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SECTION 10: SUBMITTING YOUR APPLICATION

PLEASE SUBMIT YOUR COMPLETED APPLICATION (PAGES 1 TO 3) TO REPS IN THE FOLLOWING WAYS:

OFFICE ADDRESS: Office 218, Building 7, Gold and Diamond Park

Al Quoz, Dubai, United Arab Emirates

ONLINE REGISTRATION:

www.repsuae.com and click on Register

SECTION 11: REPS LOCAL TRAINING PROVIDERS FOR ENTRY LEVEL

BFIT/IFPA	www.befitme.com	+971 50 452 0944
Body Hack	www.bodyhack.co	+971 55 374 6204
Career Sport Fitness Academy	www.careersport.net	+971 4 360 4530
EMPIRIC (Test Centre)	cara@testcentreuae.com	+971 52 289 1013
	www.empiricuae.com	
ETA College Dubai	www.etauae.com	+971 4 422 5338
GCC Training	www.gcctraining.net	+971 55 605 0378
Gems Of Yoga	www.gemsofyogadubai.com	+971 4 331 5161
Impact British Training Solution	www.impactbts.com	+971 50 521 6590
MEFITPRO	www.mefitpro.com	+971 4 323 3232
Phoenix Fitness	www.phoenixfitnessme.com	+971 50 715 9747
Pilates Academy	www.pilatesacademydubai.com	+971 56 798 4655
The Fitness Collective	www.thefitnesscollective.com	+971 56 759 3564/1
Yoga First	www.yogafirst-me.com	+971 50 374 6207
1000 Petaled Lotus	www.1000petaledlotus.com	+971 50 849 1237