



# BCRPA Personal Training ICE Registration Cover Letter

# Form A

CANDIDATE INFORMATION: Please print clearly

<i>Surname</i>	<i>Given Name(s)</i>	<i>Middle Initial</i>
<i>Mailing Address (Street)</i>		
<i>City</i>	<i>Province</i>	<i>Postal Code</i>
<i>Residence Phone</i>	<i>Cell Phone / Other Phone</i>	<i>Email Address</i>

### STEP 1: Pre-requisites

Before enrolling in a BCRPA approved Personal Training course and completing this ICE package, please ensure the following:

- You are currently fully registered as a BCRPA Weight Training Leader.
- You have completed 20 beginner programs and have provided copies (names blocked out) to your PT course conductor. – You have a schedule of these 20 programs signed off by a fitness facility supervisor/manager and have given a copy of the signed schedule to your PT course conductor.
- You have a current CPR certificate (minimum CPR-A) and a current First Aid certificate (minimum Emergency First Aid).

### Step 2: Please ensure that your BCRPA ICE PACKAGE contains the following forms:

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|--|---|
| <b>Form A:</b> ICE Registration Cover Letter             | <b>Form G:</b> Teaching Skills Form                         |
| <b>Form B:</b> ICE Instructions                          | <b>Form H:</b> Scoring Form                                 |
| <b>Form C:</b> Business Aspects Instructions             | <b>Appendices A - C:</b> Case Study Information             |
| <b>Form D:</b> Goal Setting Form                         | <b>Scope of Practice</b>                                    |
| <b>Form E:</b> Program Design Card (Phase 1 and Phase 2) | <b>List of BCRPA Evaluators</b> (request from BCRPA office) |
| <b>Form F:</b> Assessment Protocol Instructions          |   |

### Step 3: PERSONAL TRAINING INSTRUCTOR COMPETENCY EVALUATION (ICE) PROCEDURE:

#### 1. Before contacting an Evaluator:

- Review **Form B** for instructions on completing the forms
- Prepare your sample client file and marketing package (**Forms C-1 and C-2**)
- Complete the client Goal Setting Form (**Form D**) and Program Design Card (**form E phase 1 and 2**) for your chosen case study client
- Complete forms **F-2 and F-4** and be prepared to demonstrate the tests described in forms **F-1 and F-3** during the evaluation
- Obtain permission from a fitness facility to use it for the evaluation, and arrange for a friend to act as “client” during the evaluation

#### 2. Contact an Evaluator:

The list of Evaluators you were given is organized by city to help you find an evaluator who is close to your home. The evaluator will discuss the ICE procedure, how to submit your **form C** materials and **forms D, E-1, E-2, and F** for marking. The evaluator will also discuss the date, time and location of the ICE as well as any fees they may charge you to conduct the ICE.

Your evaluator will email the BCRPA confirmation once you have completed and passed the ICE.

PLEASE ALLOW 5 - 10 BUSINESS DAYS FOR PROCESSING upon received confirmation from ICE evaluator. Please check the Registry® for Fitness Professionals for registration status in the specialty. The BCRPA will not notify Fitness Leaders regarding the status of the ICE package.

Date of ICE: \_\_\_\_\_