



Oklahoma State Clinic

February 20, 2010

NSCA Mission Statement

As the worldwide authority on strength and conditioning, we support and disseminate research-based knowledge and its practical application, to improve athletic performance and fitness.

GENERAL INFORMATION

LOCATION	HOST	CEUs
University of Oklahoma 1401 Asp Avenue Norman, OK 73019	Jack Carter +1 405-329-5050 jcarter1221@att.net	0.8 NSCA 8.0 NATA
Directions: http://recruitment.ou.edu/directions/		



TIME	TOPIC	SPEAKERS
7:30-8:00am	Check-in and On-site Registration	
8:00-9:30am	Running Mechanics	Pam Dyer, CSCS, NSCA-CPT
9:30-11:00am	Impact of Protein Source and Quality on Resistance Training Adaptations	Chad Kerksick, PhD, ATC, CSCS,*D, NSCA-CPT,*D
11:00-11:45am	Lunch (provided) Questions and Answer with A.M. Presenters	
11:15-11:45am	From the Field (during lunch): Warmup and Progressions	Jack Carter, MS, CSCS,*D, NSCA-CPT,*D and Chat Williams, CSCS,*D, NSCA-CPT,*D
11:45-1:00pm	Exercise and Metabolism	Sara Polston, MS, RD, NSCA-CPT
1:00-2:30pm	Balance and Agility Training for Athletes and Non-athletes	Jason West, MS, CSCS
2:30-3:45pm	Strength and Conditioning for Distance Runners	Daylon Barnes, CSCS
3:45-4:00pm	Questions and Answer with P.M. Presenters, Evaluations, and Door Prizes	

Please call 800-815-6826 if you require special accommodations. Topics and speakers subject to change without prior notification. This clinic has hands on sessions. Participants are asked to dress comfortably and only participate within their physical limitations.

REGISTRATION FORM ♦ OKLAHOMA STATE CLINIC ♦ FEBRUARY 20, 2010

Online registration: <http://www.nscs-lift.org/stateclinics/searchclinic.asp> or mail completed registration (with payment) to:
NSCA, 1885 Bob Johnson Drive, Colorado Springs, CO 80906 or fax to: +1 719-632-6367

Name _____

Member ID _____ Student ID _____

Address _____

City/State/Zip _____

Phone # _____ Email _____

Emergency contact and phone # _____

Clinic Fees (check one)	Now thru Feb. 9th	On-site	Payment Method	Refund Policy: On or before Feb. 9th - 50%/After Feb. 9th - No refund
NSCA Member	<input type="checkbox"/> \$45	<input type="checkbox"/> \$55	<input type="checkbox"/> Check (payable to the NSCA)	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> AmEx
NSCA Student	<input type="checkbox"/> \$25	<input type="checkbox"/> \$35	Account# _____	Exp. _____
Non-member	<input type="checkbox"/> \$50	<input type="checkbox"/> \$60	Signature _____	Total Enclosed \$ _____
			Receipt: <input type="checkbox"/> Mail <input type="checkbox"/> Email	

Clinic Code 23039

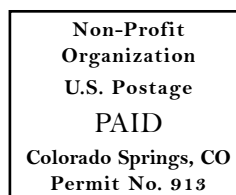
My name is Jack Carter and I am your State Director for the NSCA. I wanted to give a heads up on up coming clinics for this next year. As this brochure indicates, our first clinic is set for February 20, 2010 at the University of Oklahoma. This clinic will have both lecture and hands-on sessions. The next clinic is tentatively scheduled for August. I am still working on the details for this clinic, but wanted your input. Please fill out the short survey to help me better serve you as the State Director of Oklahoma.

Short Survey Request

- | | | | |
|--|---------|----------|------|
| 1. Would you be interested in a 2 day clinic? | Yes | No | |
| 2. Do you get more out of: | Lecture | Hands-on | Both |
| 3. Would you like a presentation during lunch? | Yes | No | |
| 4. Would you prefer the clinic manuals to be: | CD | Booklet | Both |
| 5. What topics would you like to see covered? | _____ | | |

If you have any topics you want to learn about or would like to present, please contact me. I look forward to helping trainers, coaches, therapists, and ATC's become more educated in their field of interest. Email survey response and suggestions at your convenience.

Jack Carter, MS, CSCS,*D, NSCA-CPT,*D
jcarter1221@att.net



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Saturday, February 20, 2010
see inside for more details...