



The Cooper Institute Certificate Reprint Form

Follow these 3 easy steps to order a certificate reprint. Keep a copy for your records and allow two weeks for processing.

1

**Fill out
the request:**

2

**Pay for
the reprint:**

3

**Sign and submit
the request:**

Name _____

Address _____

City _____ State _____ Zip _____

Daytime Phone _____

E-mail _____

Signature _____

I am requesting a reprint of:

- CI Certified Personal Trainer (CI-CPT)**

Certification Number (or Date Earned): _____

- Cooper Certificate Program:**

Physical Fitness Specialist

Date Attended: _____

Biomechanics of Resistance Training

Date Attended: _____

Coaching Healthy Behaviors

Date Attended: _____

Group Exercise Leadership

Date Attended: _____

Law Enforcement Fitness Specialist

Date Attended: _____

Providing Dietary Guidance

Date Attended: _____

Special Populations and Exercise

Date Attended: _____

Health Promotion Director

Date Attended: _____

Other: _____

Date Attended: _____

Reprints are \$20 each.

- Check/Money Order (made payable to The Cooper Institute)

Credit Card Number: _____ Expiration: _____

Amount Enclosed/Authorized: _____

Mail or fax the request to:

The Cooper Institute
12330 Preston Road • Dallas, TX 75230
(972) 341-3227 (fax)

- **Reprint requests will not be processed without a signature**
- **Include a copy of your government-issued photo identification**

The Cooper Institute reserves the right to refuse a reprint request.