

Plus de vie à la vie  
des jeunes, des familles  
et de la communauté



We build strong kids,  
strong families,  
strong communities

WEST-ISLAND

The Montreal YMCA Continuing Education Program Presents:

## The First Time

Sunday, February 12<sup>th</sup> from 9:00 a.m. to 12:00 p.m.  
West-Island YMCA

### Contents:

In this workshop you will learn the essentials of how to evaluate a new client. You will learn how to take an in depth history and how to perform a postural evaluation. We will cover basic muscle testing as well as movement analysis. Following the evaluation you will be shown how to design a specific and individualized strength and conditioning program based on your client's functional needs. We will also cover how to recommend activities and sports while considering the client's posture, injuries and muscle imbalances. This workshop will be both lecture and hands on so please dress in gym attire.

### Presenter: Raphael Jabbour BSc, CAT(C)

**Raphael** holds a Bachelor's degree in Exercise Science with a specialization in Athletic Therapy from Concordia University. In addition he is currently pursuing a 6 year program in osteopathic medicine. He specializes in a corrective exercise approach to orthopaedic rehabilitation and high performance training. He combines his knowledge of orthopedic evaluation, rehabilitation and therapy, soft tissue and structural techniques and corrective strength and conditioning to offer a global and integrated approach to his clients and patients. Raphael treats and conditions a wide scope of athletes. His clients and patients span from high performance athletes to the weekend warrior.

### Location: West-Island YMCA

230, boul. Brunswick, Pointe-Claire, Quebec, H9R 5N5  
Attn: Erin Goldstein, *Adult Fitness & Lifestyle Coordinator*  
Tel : (514) 630-9864 ext. 260; Fax : (514) 630-9868  
e-mail : erin.goldstein@ymcamontreal.qc.ca

Please bring pen, paper water bottle and gym attire. This workshop will be offered in English.

### REGISTRATION FORM

To register, please return this form with payment before February 8<sup>th</sup>, 2006 to the attention of Erin Goldstein

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ PROV: \_\_\_\_\_ CODE: \_\_\_\_\_

TEL.: (H) \_\_\_\_\_ (W) \_\_\_\_\_

E-mail: \_\_\_\_\_

Date of Birth: (mm/dd/yy) \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Credit card: VISA / MC # \_\_\_\_\_

#### The First Time

A) YMCA \$28.76

B) OTHERS \$46.01

(Taxes included in price)

Exp. Date: \_\_\_\_\_

