International Association of Administrative Professionals®
Columbus Chapter
8 East Long Street, Room 428
Columbus OH 43215
www.iaap-cols.com

Mind-Body-Spirit Fitness

Nia….a sensation! Nia…a body, mind, spirit phenomenon! Nia…it's like chocolate; you have to taste it! In Swahili, the word 'nia' means with purpose. Here in Columbus, Ohio and in many parts of the United States and world, Nia is coming to be known as the fitness form that allows for sensation, pleasure, and the joy of movement in your 'body's way!' Nia has been around since 1983 when its founders, Debbie and Carlos Rosas brought it into its own. Nia is now practiced in many countries around the world. It is a cardiovascular program that begins with an intention and focus, and ends with a meditative cool down. In between the beginning and end of an hour long class, is a beautiful fusion of dance, martial and healing arts practiced in a setting of music, nurturing, freedom, expression, and love.

Be prepared to move a little, laugh a little, and en"Joy" a lot!

Meeting Registration
January 23, 2008

NETWORKING: 5:30 p.m. **MEETING:** 6:00 p.m. **PROGRAM:** 7:00 p.m.

LOCATION: **The Fawcett Conference Center**
2400 Olentangy River Road, Columbus, OH 43210
Phone: 614/324-5930

MENU: Basil Chicken with Boursin Whipped Potatoes, Sautéed Spinach and Roasted Red & Yellow Tomato Relish, House Salad, Chef's Choice dessert, coffee, iced tea.

DINNER/MEETING COST: $23.00 Chapter Member $27.00 Member at Large/Non-Member
MEETING COST ONLY: $ 5.00 Chapter Member $15.00 Member at Large/Non-Member

MAIL TO: Annette Cooperider CPS
Riverwood Partners
500 W. Wilson Bridge Rd. Ste 145
Worthington, OH 43085
(w) 614-396-4924 (c) 614-425-2326
(f) 614-396-4925
E-mail: acooperider@riverwoodpartners.com

Please check all that apply:
[ ] Guest
[ ] Meeting ONLY
[ ] Past President
[ ] Vegetarian entree

Reservations/Cancellations must be RECEIVED no later than **Friday, January 18th at 5:00pm.**
(Deadlines will be adhered to—your cooperation is appreciated—There will be a $30.00 charge for returned checks)

January 2008 Meeting
Make all checks payable to COLUMBUS CHAPTER, IAAP

NAME:_____
COMPANY NAME:_____
PHONE:_____
ADDRESS: (Billing address is required for credit card processing)
_____

☐ CHECK ☐ M/C ☐ VISA

Amount Remitted: $_____

_____ _____
Signature Expiration Date

Save my credit card number for future reservations ☐