

NEW: ALL AGE SUMMER FAMILY YOGA!! REGISTRATION FORM

PLEASE PRINT

Participant Name:	_____	Address:	_____
Village/City:	_____	Zip Code:	_____
		Home Phone:	_____
Email Address:	_____	Work Phone:	_____
		Cell Phone:	_____

Children under the age of 12 MUST be accompanied by an adult.

5 WEEK SESSION #1

JUNE 16, 23, 30 & JULY 7, 14

5 WEEK SESSION #2

JULY 21, 28 & AUGUST 4, 11, 25

Saturdays

9:00 A.M.

PREPAID SESSION PRICE: \$40 INDIVIDUAL/\$80 FAMILY
DROP-IN PRICE: \$12 INDIVIDUAL

BEST VALUE - PREPAY FOR BOTH SESSIONS
\$70 INDIVIDUALS/\$140 FOR FAMILY

ADULT PARTICIPATION IS OPTIONAL BUT ENCOURAGED

MATS, BLOCKS & STRAPS ARE PROVIDED ON A FIRST COME FIRST SERVE BASIS. PLEASE BRING YOUR OWN MAT OR A TOWEL TO CLASS.

All classes taught by the certified instructors of
www.FitnessAdvantageTRAINER.com
Your specialists in at-home personal training and on-site wellness,
proudly serving Metro-Milwaukee since 2004.

FOX POINT POOL ADDITIONAL INFORMATION

The Village of Fox Point encourages all Yoga participants to consider joining the pool as a member. Both Village residents and non-residents are welcome. Additional information on pool membership can found on the Village's website here: <http://villageoffoxpoint.com/313/Swimming-Pool>

Liability Waiver: I hereby acknowledge and permit myself to participate in pool activities. I understand there is no accident insurance available, and that the Village of Fox Point, its agents and employees, are immune from liability for injury or damages relating to recreational activities. The undersigned assumes responsibility for their own care and agrees to hold the Village, its agents and employees harmless from all liability relating to the use of the pool.

A SIGNATURE OF THE PARTICIPANT IS REQUIRED. Forms without a signature will be returned.

SIGNATURE OF PARTICIPANT

PLEASE NOTE: There is a \$20 administrative fee for the cancellation of any membership and a \$10 administrative fee for the cancellation of any group swim lesson, program or team. **Membership fees will not be refunded after the pool opens on June 8, 2018.**



Waiver of Liability

I _____ (Full Name), the undersigned, have enrolled in a personal training program of strenuous physical activity, which may include, but is not limited to, aerobic conditioning, strength training and flexibility offered by Jaime Wooten. I hereby affirm that I am in good physical condition and do not suffer from any disability that would prevent or limit my participation in any physical fitness program. I acknowledge that I have either a physical examination and have been given Physician's permission to participate, or that I have decided to participate in activity and use of equipment without the approval of my Physician and do hereby assume all responsibility for my participation and activities, and utilization of equipment in my activities.

In consideration of my participation in these Personal Training exercise sessions, the undersigned, for myself, my heirs and assigns hereby RELEASE Jaime Wooten, from any liability now or in the future, including but not limited to heart attacks, muscle strains, pulls or tears, shin splints, knee, back or foot injuries, however caused, occurring during or after participation in the Personal Training sessions

I HEREBY AFFIRM THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE.

Client

Date

Trainer

Date

FitnessAdvantage
T R A I N E R



Yoga Parental Waiver, Release of Liability, Indemnification and Consent
Form

I _____ (Full Name), I, the undersigned, as the parent or legal guardian of the child named below, do hereby give my full consent and approval for my child to participate in a yoga personal training program of strenuous physical activity, which may include, but is not limited to, aerobic conditioning, strength training and flexibility offered by Jaime Wooten and staff of Personal Trainers and Fitness Instructors. I hereby affirm that my child is in good physical condition and do not suffer from any disability that would prevent or limit participation in any physical fitness program. I acknowledge that my child has either a physical examination and have been given Physician's permission to participate, or that I have decided to let my child participate in activity and use of equipment without the approval of a Physician and do hereby assume all responsibility for my participation and activities, and utilization of equipment in my activities.

In consideration of my child's participation in these Yoga Personal Training exercise sessions, the undersigned, for myself, my heirs and assigns hereby RELEASE Jaime Wooten, from any liability, damages, costs including attorney fees, and causes of action which may arise from any cause of action made by me or by, through or on behalf of my child, now or in the future, including but not limited to heart attacks, muscle strains, pulls or tears, shin splints, knee, back or foot injuries, however caused, occurring during or after participation in the Yoga Personal Training sessions

I acknowledge (a) that I have read (or have had read to me) each and every one of the provisions in this waiver, release of liability and indemnification agreement, (b) that I understand each of the provisions in this agreement and (c) that I agree to abide by them.

Continue page 2



Yoga Parental Waiver, Release of Liability, Indemnification and Consent
Form (Page 2)

Name of parent or legal guardian (printed) _____

Signature of parent or legal guardian _____

Complete address: _____

Name of child (please print) _____

Date signed _____

Date received by Trainer _____