

# YOUTH CLASS REGISTRATION FORM

\*AGES 8 through 15 years.



# FUNCTIONAL TRAINING

**NASM Professionally designed to improve:  
AGILITY, BALANCE, STABILITY, CORE STRENGTH, & ENDURANCE**

*Our classes are designed on a two class per week schedule & are offered at the following:*

Monday & Thursdays

Current Class times as of June 16: 8am—9am, 9am—10am, 11am—12pm

Coach Homer will determine which class is suitable for each student.

**WE OFFER "SPORT SPECIFIC" TEAM TRAINING ALSO!** Call Homer to arrange, (360) 736-1683.

*\*Students will be assessed as to what level class they should participate in.*

*Participants must pre-register & provide full payment prior to first class of each session.*

**Member Cost: \$5/class X (8 classes) = \$40/session**

**Non-Member: \$5/class + \$5 Youth Day Use Fee X (8 classes) = \$80/session**



Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birth date: \_\_\_\_\_

Parent: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Type of Sports Involved In: \_\_\_\_\_

Date of FIRST Class for this session : \_\_\_\_\_

Session Month: \_\_\_\_\_ Class Time: \_\_\_\_\_

Facility: \_\_\_\_\_ Instructor: \_\_\_\_\_

For RECEPTION staff only:

Registration Date: \_\_\_\_\_ Amount Paid:  \_\_\_\_\_ Payment Type: \_\_\_\_\_

Staff Initial: \_\_\_\_\_ Entered in BP: \_\_\_\_\_ Date: \_\_\_\_\_

In registering my child for this class, I acknowledge an understanding that no insurance coverage is provided and assume responsibility for any cost relating to any accident or injury that might occur while participating in the class. Furthermore, I (we) agree to save and hold harmless Thorbecke's FitLife Centers, their employees and any volunteers from any liability, damages, or expenses in any way to the participants in the class. Training may require appropriate physical contact between the instructor and trainee. Parents are welcome to observe any training sessions. Classes are conducted in the main areas of the club.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_