

CHALLENGE CENTER AQUATICS FITNESS CLASS



JUMP INTO AQUATICS!!!!!!!

WHERE: Ray and Joan Kroc Corps Community Center
6845 University Ave, San Diego CA 92115
WHEN: **Wed** 10am – 12pm **Fri** 11am – 1pm
FEES: \$5 per Class.

Aquatics Enrollment

Participant Last

Name: _____ First _____ MI _____

Address: _____ City _____ Zip _____

Day Phone _____ Alternate Phone _____

E-Mail Address: _____

Participant Emergency Contact

Name/Relationship: _____ Phone: _____

Person(s) Assisting You in the Pool:

Attendants Last Name: _____ First _____ MI _____

Attendant's Emergency Contact

Name/Relationship: _____ Phone: _____

Enclosed Fee

Credit Card No: _____ exp. date _____ VISA MC AE

Check: Make checks payable to Challenge Center

- I/We understand that the 1st payment for the class is to be paid in full prior to the start of the class and thereafter due at the beginning of the month.
- I/We understand that make-ups or discounts for classes missed during the month are not offered unless prior arrangements are submitted in writing.
- I/We understand that this is a "group" exercise class and if I need physical assistance to carry out the exercises or to maintain balance, I will need to bring a personal attendant who is capable of providing such assistance in the pool. Assistance will be provided to enter/exit the pool if needed.
- I/We understand that non-compliance with any program policies or procedures may result in refusal of services by Challenge Center or aquatics instructor.
- I/We understand that medical approval to participate may be required at any time and is left to the discretion of the screening therapist. Medical approvals are to be renewed after an extended absence or after an absence for medical reasons, and it is the participant's responsibility to keep medical approvals up to date.

Please check one 1xweek ___W ___F 2xweek

"I have read and understood the above policies. Any questions I had were answered to my full satisfaction."

Signature _____

Date _____

Return or Mail Registration Form and Payment to:

Challenge Center

5540 Lake Park Way

La Mesa, CA 91942

619-667-8644 Fax 619-667-8644

www.challengecenter.org