



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# KICKSTART

This course will help you KickStart your wellness journey! Three sessions in a group setting will allow you the confidence to know you are getting a full body workout from a Certified Personal Trainer.

## REGISTRATION FORM

### PARTICIPANT INFORMATION

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

M

F

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### Circle Membership Type:

Adult

Couple

Family

Senior

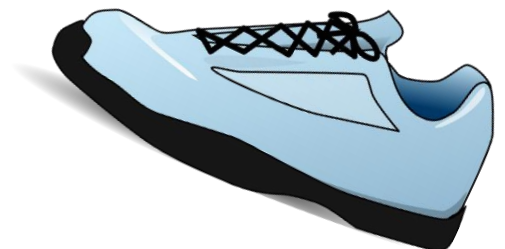
Couples Sr

Single Parent Family

### Waiver:

I hereby certify that this form is complete and accurate, and the participant has permission to engage in all activities unless otherwise specified in writing. I understand the YMCA OF CORSICANA assumes no responsibility for injuries or illnesses which I may sustain as a result of participation in athletics. I understand that there is a risk of injury while participation in physical activity and I agree to hold harmless the YMCA, its staff and volunteers for accidents or injuries arising out of participation in the activity. Photo Release: I give permission for the use of photographs of myself in publications and/or websites.

First Name \_\_\_\_\_



Members Only