



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

ORIENTATION

Members Only

This course will give you a basic understanding of how to use the cardiovascular and weight machines in our Fitness Center.

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.

Signature _____