



Group Fitness
REGISTRATION FORM
www.stacydittmer.net
204-761-1101

Please bring this form along with the Par-Q form to your first class.

Name: _____ **Age:** _____

Email: _____

Phone Number: _____

Address: _____ **Postal Code:** _____

Emergency Contact Name: _____

Emergency Contact Number: _____

Class information at www.stacydittmer.net

For any class changes/updates,
please add Stacy on FB at Stacy
Dittmer Fitness or follow on
Twitter @stacydittmerfit

Location:
First Baptist Church, 3881 Park Ave.

PLEASE BRING:
Water
Indoor shoes

Liability Waiver:

I, the undersigned, being aware of my own health and physical condition, and having knowledge that my participation in any exercise program may be injurious to my health, am voluntarily participating in a group personal training program with Stacy Dittmer.

Having such knowledge, I hereby release Stacy Dittmer from liability for accidental injury or illness which I may incur as a result of participating in the physical activity. I hereby assume all risks connected there with and consent to participate in the program.

I agree to disclose any physical limitations, disabilities, ailments, or impairments which may affect my ability to participate in the fitness program.

I consent and grant permission to Stacy Dittmer to use photographs of my image during my participation in the fitness program, for promotional purpose.

Signature: _____ Date: ___/___/___