Anderson Township Park District

Boot Camp, age 18 years and up *rev. 5/18*

Register in advance. Create a new workout routine to experience weight loss, increased energy, improved strength and more. Participants will be led through a combination of cardio intervals, plyometrics, body weight exercises and strength training. Successful boot campers are at all different fitness levels and ages. Classes are instructed by boot camp instructor Sharon Chamberlin, an ACE-Certified Personal Trainer (also certified in metabolic training) and NESTA Fitness Nutrition Coach. Please bring a mat and a water bottle. When the weather permits, classes will take place outdoors.

Classes are held Monday–Thursday from 6-7 p.m. Select which days of the week you would like to attend. Days must be picked at registration and may not be changed once the session begins. *For questions on how to calculate session prices, call (513) 388-5082.*
Classes may be rescheduled due to instructor's vacation dates.

Days: Mon., Tue., Wed. & Thur. **Time:** 6–7 p.m. **Place:** Beech Acres Park RecPlex, 6915 Beechmont Ave.
Price: 1 day a week: $10 per class/resident; $11 per class/non-resident
2 or more days a week: $9 per class/resident; $10 per class/non-resident

Session 1: June 15-July 23 ***(Skip June 22-25)*** **Session 2:** July 27-September 3

Questions? (513) 388-4513 **Fax:** (513) 231-4190 **Weather Hotline:** (513) 357-6629 ext. 1

Boot Camp Registration ~ Summer 2015

Participant's Name_____ Birthdate ____/____/____ Gender _____
Phone (h) _____ (c) _____ E-mail_____
Address _____ City _____ State _____ Zip_____
Medical Concerns: allergies, conditions, medications: _____
Emergency Contact Name: _____ Phone: _____

Please complete the following: **Session 1:** ____ (5 weeks) **Days:** (Circle) M T W TH
Session 2: ____ (6 weeks) **Days:** (Circle) M T W TH

Total Due: $_____

Office Use Only: Date_____ Total Paid $_____ Cash____ CC____ Check #_____ Ck Name_____ Staff _____

Make checks payable and return to: Anderson Township Park District, Beech Acres Park RecPlex • 6915 Beechmont Ave • Cincinnati, OH 45230
Registrations accepted on a first come, first served basis and are subject to the completion of payment and *Release of Liability & Authorization.* The ATPD may cancel or alter programs pending registration numbers.

RELEASE OF LIABILITY & AUTHORIZATION: I, the undersigned, hereby authorize my, and/or my child's, participation in the Anderson Township Park District ("ATPD") activity for which I am registering. I knowingly and freely accept all risks associated with participation in this activity, and hereby release: the ATPD; Forest Hills Local School District; Anderson Foundation for Parks and Recreation; and Beech Acres Parenting Center; and their respective Boards, employees, agents, assignees, sponsors, and volunteers from all responsibility in the event of accident or injury associated with participation in this activity. I hereby acknowledge the ATPD has provided me with, as required by law, the Ohio Department of Health "Concussion Information Sheet", via www.andersonparks.com/ConcussionLaw and at the Beech Acres Park RecPlex, 6915 Beechmont Ave, Cincinnati, OH 45230.

In consideration of my and/or my child's participation in this ATPD activity/program, I agree that my likeness, or the likeness of my child, may be photographed or videotaped and that such image(s) may be published in an outlet used to promote or publicize the ATPD. Furthermore, I authorize the ATPD to use my e-mail address to send me ATPD information. My signature below indicates that I am at least 18 years of age, and that I have read and understand the above information concerning participation in the ATPD activity for which I am registering myself and/or my child.

Participant (Parent/Guardian) Name_____ Signature _____Date _____

Visa_____ MasterCard_____ Card #_____ 3 Digit Security Code (Located on BACK of Card):_____
Expiration Date_____ Name on card_____