

**REGISTRATION
FORM '08**



Participant's Name: _____ Date: _____

Address: _____

City _____ State: _____ Zip: _____

Date of Birth: _____

Cell or home phone #: _____

Email: _____

Would you like to be included in Coach Cassandra's email distribution list for class promotions or nutrition and fitness tips? YES NO

How did you hear about Coach Cassandra's class? _____

CLASS SCHEDULES & PROGRAM RATES:

Indicate which class you're registering for:

Indicate one session or both, spring & summer session:

BOOTCAMP:

Mondays, 6:30pm–7:30pm

Tuesdays, 6:00am–7:00am

FUNCTIONAL FITNESS:

Wednesdays, 6:30pm–7:30pm

One 6-week session: \$115

Register for both sessions: \$220 (*before 4/28*)

Drop-in for class: \$20

REGISTRATION:

Registration is open to anyone. Please send completed form along with check payment to reserve your spot in class to the attention of:

Cassandra Hawkinson
2602 N. Wayne Avenue
Chicago, IL 60614

Once your registration is confirmed, you will be sent a waiver form if you are a NEW participant of Coach Cassandra or Coach Vanessa's classes. Your waiver form will be kept on file for participation in future classes.