

# FRESH START Experience

## Saturday, January 24<sup>th</sup>

**Registration Deadline:**

Wednesday, 14<sup>th</sup>



**Event Details:**

Doors open 8am

Event runs 815am - Noon

**Pricing:**

**\$30 per person (cash or check)**

(Adults Only)

Credit Card \* Online Payment available (processing fee applies)

Visit our website at [ccfitnesscenter.com](http://ccfitnesscenter.com) under "Adult Activities" Tab

**NO REGISTRATION ACCEPTED WITHOUT FULL PAYMENT**

*Limited Availability - Secure your spot today!*

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### FRESH START Experience Registration

Participant's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Fitness Center Member: Yes \_\_\_\_\_ No \_\_\_\_\_

Fitness Class - 30 min. experience (choose one): Water Aerobics \_\_\_\_\_ Studio Cycling \_\_\_\_\_ AOA \_\_\_\_\_

Amount Paid: \_\_\_\_\_ Date Paid: \_\_\_\_\_ Cash: \_\_\_\_\_ Check: \_\_\_\_\_ Credit Card: \_\_\_\_\_ Online: \_\_\_\_\_

Each participant must sign below & acknowledge the existence of and assume responsibility for certain risks associated with the program which may cause damage to property or personal bodily injury or death to the participant, and further more, herewith agree to indemnify & hold forever harmless the Merrick County Health & Fitness Center, its Board of Directors, Employees &/or Contract Vendors.

I have read the entry information provided & certify my compliance by my signature below. I also understand that the fee is nonrefundable, unless otherwise approved by Center Director.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Facebook: [fitnesscentercentralcity](https://www.facebook.com/fitnesscentercentralcity)