



Yvonne's Fitness Registration Form

Winter 2019- Jan. 5th – March 22nd (11 weeks)

Yvonne's Fitness-Cell: (204) 295-6060 or e-mail: zumbafunwithyvonne@gmail.com

•Please fill out in full and return back with full payment to Yvonne's Fitness (56 Fairhaven Rd, Wpg, R3P 2G8)

Name: _____ Address: _____

Phone (Day): _____ Phone (Evening/Cell): _____

E-Mail Address: _____ Age: _____

***I consent to receiving e-mail regarding Zumba & Fitness activities with Yvonne's Fitness* YES ___ NO ___**

Emergency Contact Name: _____ Phone #: _____

•Please indicate which timeslot you will be attending (check all that apply):

Zumba Classes

___ Mon 9:15-10:15 am ___ Tues 7-8 pm

___ Wed 9:15-10:15 am ___ Thurs 7-8 pm

Zumba Toning/Core Classes (1 to 2.5 lb toning sticks provided- Please bring a mat)

___ Thurs 6-7 pm

___ Fri 9:15-10:15 am

Strong by Zumba Class

___ Sat 9-10 am (Fort Garry Mennonite Brethren Church, 1771 Pembina HWY) Starts Sat. Jan. 5

Zumba Kids Classes-8 Week Session (No Class on Feb. 18)

___ Mon 5-5:45 pm (Jan 14 to Mar 11) Ages 6-10 (Lindenwoods *89/99)

Zumba Gold Classes- 10 Week Session

___ Wed 10:20-11:15 am (Jan. 9- Mar. 20) *\$85/\$105

What pass would you like? (Incl. GST)-Zumba once/ week, get 11 class pass; twice/week, get 22 class pass; 3+unlimited

___ 11 CLASS PASS \$85 ___ 22 CLASS PASS \$149 ___ 6 CLASS PASS.....\$60

___ Zumba Drop-in.....\$13 ___ Yoga Drop-in.....\$15

___ **Unlimited Regular Zumba, Toning & Strong Classes.....\$185**

___ Unlimited Zumba, Toning, Strong & **One** Yoga Session....\$249 (\$339 for both Yoga Sessions)

___ **Zumba Gold** (10 weeks- Jan 9- Mar 20)\$85 if paid by Dec. 31, after \$105

___ **Yoga** Mon 10:20 am to 11:15 am- **10 weeks** (Jan 7-Mar 11) *\$99/\$119

___ **Yoga** Tues 8:15 to 9:15 pm **60 min. class – 10 weeks** (Jan 8-Mar 12)* \$99/\$119

___ **Yoga** Thurs 8:15 to 9:30 pm **75 min. class – 10 weeks** (Jan 10-Mar 14)* \$109/\$129

___ **Men's Yoga** 8:30 pm **60 min. class- 10 weeks** (Jan 7- March 18, no class on Feb. 18) *\$99/119

___ **Kizomba Ladies Styling** 90 min. Sat 6:15 pm (Jan 12. Mar 2, 2019 at Yoga, Pilates & More) *\$15/\$20

***Aqua Zumba** must be registered thru City of Winnipeg at 311 *Yoga/Zumba Kids/Gold Early Bird Price before Dec. 31st

*****Passes are non-refundable and non-transferable and expire at the end of Winter Session 2019 *****

Total Payment Enclosed: \$ _____ Payment: Cash _____ Cheque _____ (Payable to **Yvonne's Fitness**)

Or E-transfer _____ (zumbafunwithyvonne@gmail.com_

•Submit: Registration Form, PAR-Q & Waiver Form, & Payment to **Yvonne's Fitness** or **56 Fairhaven Rd, Winnipeg, MB, R3P 2G8.**

Yvonne Bayer-Cheung is a licensed Zumba& Yoga Instructor with certifications in Zumba Basic 1 &2, Zumba Toning, Zumba Kids, Zumba Gold, Aqua Zumba, Zumba Step, Strong by Zumba, Zumbini as well as YogaFit Level 1,2,3,4,5 & Seniors & Kids, Anatomy & Alignment. She is also a certified FIS (Fitness Instructor Specialist), and CanFitPro member and CPR Trained. Yvonne has over 20 years of dance and teaching experience.

Register early and reserve a spot now. E-mail at zumbafunwithyvonne@gmail.com or call **204-295-6060** for more information. Check out

<http://yvonneb.zumba.com> or www.facebook.com/ZumbaWithYvonne .

Schedule subject to change.

PAR-Q & YOU
Physical Activity Readiness Questionnaire & Fitness Waiver

All participants are required to read and fill in the form, answering in truth in order to register and participate in any of the Zumba/Yoga classes at LWCC & FGCC. Once completed, submit with full payment to Yvonne Bayer-Cheung.

PAR-Q & YOU: Please check the appropriate answer:

1. Has your Doctor ever said that you have heart condition and that you should only do physical activity recommended by a Doctor? YES___ No___
2. Do you feel pain in your chest when you do physical activity? YES___ No___
3. In the past month, have you had chest pain when you were not doing physical activity? YES___ No___
4. Do you lose your balance because of dizziness or do you ever lose consciousness? YES___ No___
5. Do you have a bone or joint problem (for example, back, knee or hip) that could be made worse by a change in your physical activity? YES___ No___
6. Is your Doctor currently prescribing drugs (for example, water pills) for your blood pressure or heart condition? YES___ No___
7. Do you know of any other reason why you should not do physical activity? YES___ No___

*****If you checked "YES" to any of the questions above, you will require your doctor's approval before participating*****

AGREEMENT OF RELEASE AND WAIVER OF LIABILITY FOR ZUMBA/YOGA CLASSES

_____ (herein referred to as the participant)

(Print YOUR name)

I, the above named participant, hereby agree to the following:

1. I am participating in classes taught by the authorized ZUMBA/YOGA instructor Yvonne Bayer-Cheung or licensed substitute. I recognize that the classes may involve strenuous physical activity including, but not limited to, cardiovascular conditioning and interval training, muscle strength and endurance training, and other various fitness activities that may cause physical injury, and I am fully aware of the risks and hazards involved.
2. I understand that it is my responsibility to consult with a physician prior to and regarding my participation in the ZUMBA/YOGA classes. I represent and warrant that I am in good physical condition and do not suffer from any known disability or medical condition which would prevent or limit my participation in this exercise program.
3. In consideration of being permitted to participate in ZUMBA/YOGA classes, I agree to assume full responsibility for any risks, injuries or damages, known or unknown, which I might incur as result of participating in the program.
4. In consideration of being permitted to participate in ZUMBA/YOGA classes, I knowingly, voluntarily and expressly waive any claim I may have against Yvonne Bayer-Cheung or licensed substitute for injury or damages that I may sustain as a result of participating in the program.
5. I, my heirs or legal representatives forever release, discharge and covenant not to sue Yvonne Bayer-Cheung or licensed substitute for any injury of death caused by their negligence or other acts.

I HAVE READ THE ABOVE RELEASE AND WAIVER OF LIABILITY AND FULLY UNDERSTAND ITS CONTENTS. I VOLUNTARILY AGREE TO THE TERMS AND CONDITIONS STATED ABOVE.

DATE

PARTICIPANT SIGNATURE

If participant is under age 18:

AS LEGAL GUARDIAN OF _____, I CONSENT TO THE ABOVE TERMS AND CONDITIONS.

DATE

SIGNATURE OF PARENT