



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# FIT & FIERCE

**Small Group Fitness Class  
EAST AREA FAMILY YMCA**

**March 6 – April 26**

**\*Try it for FREE on 2/27\***



**Tuesdays & Thursdays  
12:00pm – 12:40pm**

\$50 per member

Code: 0411FIERCEO1

**Tuesdays  
12:00pm – 12:40pm**

\$35 per member

Code: 0411FIERCEO2

**Thursdays  
12:00pm – 12:40pm**

\$35 per member

Code: 0411FIERCEO3

This express class has it all for any fitness level and will use short intervals of intense exercises. You will be challenged and will develop muscle endurance. It will be safe and fun for everyone! Each class takes place in the gymnasium. Just bring water, a towel and yourself!

For more information, please contact Eric Feldstein at  
315.637.2025 ext. 229 or [efeldstein@syracuseymca.org](mailto:efeldstein@syracuseymca.org)

# REGISTRATION

Parent/Adult Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Address \_\_\_\_\_ Email Address \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Emergency Phone \_\_\_\_\_ Participant Allergies \_\_\_\_\_

Participant Name \_\_\_\_\_ Age \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade \_\_\_\_\_ Gender \_\_\_\_\_  
PROGRAM CODE PROGRAM NAME DAY TIME FEE

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Participant Name \_\_\_\_\_ Age \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade \_\_\_\_\_ Gender \_\_\_\_\_  
PROGRAM CODE PROGRAM NAME DAY TIME FEE

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Participant Name \_\_\_\_\_ Age \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade \_\_\_\_\_ Gender \_\_\_\_\_  
PROGRAM CODE PROGRAM NAME DAY TIME FEE

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

TOTAL FEE:

Program Refund Policy: Refunds will be issued if notice is given within seven business days prior to the start date of the program, unless stated otherwise. Once the program has started there will be no refunds issued. The YMCA reserves the right to cancel a program that does not have the minimum enrollment. Programs cancelled by the YMCA will be refunded in full by check, or as a program credit, based upon member's preference. All refund requests must be made through the director of the program.

Signature \_\_\_\_\_

I give consent that the YMCA may take photographs, slides or video tapes of my child and/or me as needed for its records or for promotional use, such as brochures, advertisements, and the YMCA of Greater Syracuse websites.

Signature \_\_\_\_\_



**EAST AREA FAMILY YMCA**  
200 Towne Drive  
Fayetteville, NY 13066

Session: \_\_\_\_\_

Today's Date: \_\_\_\_\_

Staff Name: \_\_\_\_\_