



Small Group Request Form

Name: _____ Phone: _____

Email: _____

Training Sessions and Packages

One Session
All Groups \$30
(3-6 Participants)

Three Sessions
3 Participants \$80
4 Participants \$80
5 Participants \$75
6 Participants \$75

Five Sessions
All Groups \$115
(3-6 Participants)

*****All Rates apply per participant*****

Endurance Training, Strength Training, Weight Loss, Functional Training Mobility, and Other

Names of Participants

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Type of Class: _____

Class Description:

Note: Payment for sessions and packages are due before training sessions.

Please see the reverse side for additional questions and information.

***ALL PURCHASED SMALL GROUP PACKAGES AND SESSIONS WILL EXPIRE IF NOT USED WITHIN 6 MONTHS.**

Limitations/Concerns

Please describe below any physical limitations, medical conditions, or previous surgeries that may prevent your group from doing certain types of exercise. Please be specific!

Additional Information

Training Requested

Please select below the type of training you are requesting:

1 Session 3 Sessions 5 Sessions

Request a Trainer:

Days and Times Available (Please be specific!):

Please Read and Understand:

I understand that if I make an appointment with a trainer and need to cancel the appointment, I must give at least a 24-hour notice. If I fail to do so, I understand the cost of the appointment can be charged to my account. I also understand that if someone in my group is not able to make it to a session, they will not be able to make it up.

All Group members must take the Physical Activity Readiness Questionnaire (PAR-Q) and seek medical consultation/approval if necessary before first session.

Assumption of Risk and Responsibility: In recognition of the inherent risks of personal injury or property damage of any kind that may occur while you are participating in any activity, you assume all such risks whether likely or unlikely, reasonable or unreasonable. This includes without limitation, all risk in your use of the locker room, facilities, activities, classes, personal training, pool, wet areas, parking lot, sidewalk and programs now or in the future made available.

Release of Liability: In consideration for your using the YMCA facilities and participating in YMCA activities or programs, you voluntarily and discharge from any and all legal liabilities, claims, demands, or claims, demands, or causes of action and further agree not to sue, claim against, property of or prosecute, and further agree to defend, indemnify and hold harmless, the Dow Bay Area Family YMCA, and its officers, directors, members, agents, employees, instructors or volunteers for any injury or death caused by or resulting from your participation in or use of any of the YMCA's activities, property or equipment whether or not caused by negligence or from any other cause.

By signing below you and your group agree to the terms and conditions listed in this agreement and with the Y's rules & regulations.

Signature:

Date:

Please submit completed forms to Alex Fryzel, Assistant Director of Health & Wellness. Please allow 2-3 business days for a trainer to contact you.

Thank you!
For a better us.®