



FOR YOUTH DEVELOPMENT  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# BOOT CAMP BEAST MODE BY AMIE HUSTER



REGISTER NOW

YOUR TRANSFORMATION BEGINS FEB 1 ST

CLASS WILL BE HELD:

WEDNESDAYS 5:30 - 6:30 PM  
SATURDAYS 8:00 - 8:45 AM

Registration fees for the total 6 week program:

Members: \$100.00  
Non-Members \$150.00

Every participant will receive a body fat composition at the beginning and ending, plus you will all receive a t-shirt at the completion of the course.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_

Email: \_\_\_\_\_

Shirt Size  Y Sm  Y Med  Y Lg  Ad Sm  Ad Med  Ad LG  Ad XL  Ad XXL

If under 18:

Parent Name: \_\_\_\_\_ Parent Cell: \_\_\_\_\_

Parent Email: \_\_\_\_\_

YMCA of Ponca City  
1604 W. Grand Ave  
Ponca City, OK. 74601  
P 580 765 5417  
F 580 765 5390  
www.ymcaofponcacity.net

**ALL PARTICIPANTS MUST  
SIGN WAIVER ON BACK**



Waiver of Liability

I acknowledge that the YMCA of Ponca City does not assume any responsibility concerning my physical ability to participate in any activities and I must personally obtain independent physical examination and expert advice concerning those activities in which I am not able to participate, and that the YMCA of Ponca City or its employees are not undertaking or qualified to give such advice.

I waive all liability on the part of the YMCA of Ponca City to determine or limit the extent of my participation in physical activities. I also agree to be solely responsible for any and all costs, damages, and expenses incurred by me as a result of any injury sustained while participating in this activity, and further agree not to hold the YMCA of Ponca City, its staff and instructors, responsible in any way for any such injury. I know there will be a possibility of traffic on the course route. I assume the risk of running in traffic. I also assume any and all other risks associated with running in this event including, but not limited to, falls, contact with other participants, the effect of the weather and the conditions of the roads, all such risks being known and appreciated by me. Furthermore, I agree to yield to all emergency vehicles. I am also fully aware that baby strollers, animals, and head phones are strictly prohibited. The undersigned further grants full permission to sponsors and/or agents authorized by them to use any photographs, video tapes, motion pictures, recordings or any other record of this event for any purpose.

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