PELHAM PARKS AND RECREATION

6 Village Green, Pelham, NH 03076 Phone: 635-2721 Fax: 508-3094 Email: Recreation@pelhamweb.com

Try for fitness this year!

<u>Live Stronger Classes</u>

8 Tuesdays at Pelham Senior Center, 8 Nashua Rd., Pelham, NH

Open to age 16 to 106!

Participant Release Form

DOB (required):

Participant Name _____

Address	Town	State	Zip
Cell phone:	Home phone:		
Email address:			
This is a recreation level program to learn to 8 weeks starting September 8 ending October 3. This program poses limited risks to the part	27, 2015 at the Pelham Senio	or Center. Space is limited;	first come, first serve.
bones, concussions, heart attacks and even death. We physical capabilities should be made known to the Peresistance bands if desired (optional). No prior known a total body workout to strengthen, sculpt and tone at Live Stronger will boost energy and lift your mood!	We advise that all those participat tham Parks and Recreation Depa ng and comfortable supportive at ledge or skills are required in ord all the major muscle groups with	ing be in good physical condition rtment. thletic shoes. Bring floor mat, which ler to take part in this program. instructor Sue O'Maley, classes	water bottle and own weights or Participants will be introduced to held at the Pelham Senior Center.
Please list any physical or other condition, be necessary and helpful to insure participants' health	medications the participant is tak h and safety:	ing, dietary restrictions, allergio	s, or other information which may
I have read and understand the information affect his/her participation. He/she meets the standa good working condition. I assume all of the risks nor I will follow the rules and regulations provided by the I, the undersigned, hereby agree to release employees, agents, representatives, coaches, volunte property damage or personal injury resulting from fai judgment by the leader in good faith response to employees and the eigenvalue excuse any of the leaders to act to the circumstance. You have my permission to have a physicia Participation may be videotaped or photographed for	ards required for participation and mally incidental to the nature of activity leaders/coaches/supervie, indemnify, save and hold harmers, from any and all liability, act lure to obey safety regulations are gencies and exigencies which cat with reasonable care for the same attend to me, if it is deemed not mally incidental and to me, if it is deemed not mally incidental and to me, if it is deemed not mally incidental and to me, if it is deemed not mally incidental and to me, if it is deemed not mally incidental and to me, if it is deemed not mally incidental and to me, if it is deemed not mally incidental and to me, if it is deemed not mally incidental and to me, if it is deemed not mally incidental and incidental an	I will have the necessary equipithis activity, including risks whisors. less the Town of Pelham, the Picions, causes of actions, debts, and directions of the activity lead account during the activity; providifety of the participant during the	ment, if needed, which will be in ch are not specifically foreseeable. Tarks and Recreation Dept, its claims or demands of any kind for der or resulting from the exercise of ed, however, that nothing he course of the activity appropriate
Executed this day of	, 20	Signature	e of Participant
In case of emergency, please contact:			
Name:	Relation		
Town/City/State	Telephone		
Payment received: Check No Circle: MC VISA	Payable to Town of Pelha Parent signature needed	am: \$70.00 if participant is under age 16.	