



Cardio Kickboxing



Hilltown Township Parks & Recreation and Fitness That Fits (www.fitnessthatfits.net) co-sponsors this exciting exercise program for females ages 13-up. All participants should bring their own exercise mat, water bottle and wear comfortable sneakers to each work out. ** As with any exercise program, please consult with your physician before starting.

This is an excellent way to get your whole body into great shape! And while you burn calories, you are releasing a lot of stress. Cardio Kick Boxing involves a wide range of moves, combining various techniques that add up to an impressive workout. This class typically targets all the major muscle groups – abs, legs, buns, arms, as well as your cardiovascular system. If you are new to kick boxing, don't worry if you feel unfamiliar with the techniques. You are encouraged to progress at your own pace.

When: Wednesdays, 5:30 - 6:30 pm, May 5 - June 9 (6 - classes)
 Cost: \$60.00 (NR \$65)
 Where: Blooming Glen Park - Scout Cabin
 Reg #: 10251

Please Cut Along Dotted Line Please Cut Along Dotted Line

Office: 215-453-6000 Fax: 215-453-1024 Email: recreation@hilltown.org	Checks payable to Hilltown Township P.O. Box 260, 13 W. Creamery Road Hilltown, PA 18927	www.hilltown.org Activity & Fee Summary																				
Parent/Legal guardian or participant if over 18 years old: _____ Street Address: _____ City, State, Zip: _____ Day Phone: _____ Night Phone: _____ Email Address: _____ Allergies/Medical Conditions? _____ Special accommodations? _____		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">First Name</th> <th style="text-align: left;">Age/Birth Date</th> <th style="text-align: left;">Activity #</th> <th style="text-align: left;">Fee</th> </tr> </thead> <tbody> <tr> <td>1. _____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>2. _____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>3. _____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td colspan="3" style="text-align: right;">** Fee Total **</td> <td style="border: 1px solid black; width: 100px;"></td> </tr> </tbody> </table>	First Name	Age/Birth Date	Activity #	Fee	1. _____	_____	_____	_____	2. _____	_____	_____	_____	3. _____	_____	_____	_____	** Fee Total **			
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3. _____	_____	_____	_____																			
** Fee Total **																						
Emergency Contact (if different): _____ Relation: _____ Home Phone: _____ Work Phone: _____																						

CANCELLATION & REFUND POLICY:

Hilltown Township reserves the right to cancel any program or activity due to insufficient participants, inclement weather or for any reasonable cause. Should a cancellation occur, a refund of fees paid will be provided. Participants who are unable to attend a program should notify the parks and recreation department 48 hours before the event in order to qualify for a refund. Refunds will not be provided for participant cancellations less than 48 hours before the event. There is a \$25.00 fee on all returned checks

LIABILITY WAIVER & RELEASE:

In consideration for being permitted to use Hilltown Township facilities and/or participate in Hilltown Township sponsored programs, I agree, for myself and/or for any minor children in my care as parent or legal guardian ("my minor children") who participate in any such programs, to fully and completely release Hilltown Township, its officials, employees, boards, departments, agents and affiliated entities from any and all claims, liabilities or actions for any personal injuries to me, personal injuries to my minor children and/or any loss or damage to my personal property or the personal property of any such minor children arising from our/their use of Hilltown Township facilities or participate in Hilltown Township sponsored activities and programs. I understand that no health and/or accident insurance is provided by Hilltown Township. I also understand and agree, for myself and/or for my minor children in my care, that I am solely responsible at any sole cost and expense for furnishing medical or other insurance to cover any expenses related to any such personal injuries or property damage which may occur as a result of our participation in any Hilltown Township sponsored programs. I agree, for myself and/or for my minor children, to comply with all Hilltown Township rules and regulations, including any rules and regulations governing any programs for which I, and/or my minor children, have registered, and understand and agree that noncompliance with any such rules and regulations by me or my minor children may result in termination of the privilege to use Hilltown Township facilities and/or participate in Hilltown Township sponsored activities and programs. In the event of such a termination for cause, I understand that I will not be entitled to be reimbursed for any registration fees. Intending to be legally bound hereby, and with full authority, I acknowledge, agree to and accept the terms of this Registration/Liability and Release.

Print Name: _____ Print Names of Minor Children (if any): _____
 Signature: _____