



Free Healthy Aging Workshop Fitness & Nutrition in the 21st Century

TEL HI AGING & OLDER ADULT WELLNESS PROGRAM

REGISTRATION FORM

Class Schedule: Every Thursday, August 08 – September 19, 11 AM-Noon
TEL HI Gym, 555 Chestnut Street, SF

We ask that all participants agree to the following terms:

- Commit to the full 6 week program
- Meet minimum age requirement: 50 years old
- Participate during classes

First Name	<input type="text"/>	Last Name	<input type="text"/>
Date of Birth	<input type="text"/>	Age	<input type="text"/>
		Gender	<input type="text"/>
Street Address	<input type="text"/>		
City/Zip	<input type="text"/>	Email Address	<input type="text"/>
Primary Phone	<input type="text"/>	Cell Phone	<input type="text"/>
Emergency Contact	<input type="text"/>		
Relationship To Participant	<input type="text"/>	Contact Number	<input type="text"/>
List Allergy/ Medication	<input type="text"/>		

Waiver: I release TEL HI from responsibility for any risk of bodily injury, death, or property damage as covered in the "General Release of Liability". I assume all risk for any injuries. I sign of my own free will. I agree to the terms outlined above. I understand that TEL HI may remove me from the program if I do not follow the outlined terms.

Signature: _____ Date: _____

PHOTO RELEASE: I/we agree to allow use of my/our photograph in program publicity. I have read and fully understand these policies. Initials: _____

Please return completed form to Koletti Leha, Program Manager, at KLeha@telhi.org. Or it can be dropped off at TEL HI, 660 Lombard Street, SF. For additional information please email Koletti or call 415.421.6443, ext 30