

"Baby Boomers & Beyond"

Body & Balance Workouts!



Come join us on Friday mornings at the Robbinsdale Police and Fire Building Community Room to see how much fun we're having with this newly offered program! Nancy Stoneberg, Certified Personal Trainer and owner of StoneFitness has dedicated much of her time in training and educating 55+ and helping them realize that it's never too late to make a positive difference in strength, balance and overall wellness. These classes are for all levels and abilities. Nancy's motto is "YES, YOU CAN!"

Activity #'s: 130401 (Mar, Apr, May) or 230401 (June, July, Aug)

Who: Adults

When: Fridays, 9:00-9:45 am

Where: Community Room, Robbinsdale Police & Fire Building
41st & Hubbard Ave N, Robbinsdale

Fee: \$24 per 4 week sessions

***FYI:** For more information or to register check online at <https://webtrac.robbinsdalemn.com>. You can also check our website: www.robbinsdalemn.com. Or call 763-531-1278, Monday-Friday, between 8:30 am and 4:00 pm. Or mail/drop off with payment to Robbinsdale City Hall, 4100 Lakeview Ave. N, Robbinsdale, MN 55422. Refunds, program credits or transfers are allowed up to registration deadline. All refunds are subject to a \$5 service fee. Confirmations are not sent. Participants should attend the class unless informed it has filled or been cancelled. No refunds after the deadline. Payment by check authorizes the city to use information from your check to make a one-time electronic transfer from your account to process the payment.*

"Baby Boomers and Beyond" Registration & Waiver Form

Please print clearly. Make checks payable to City of Robbinsdale; 4100 Lakeview Avenue No., Robbinsdale, MN 55422

Name: _____ Phone(H) _____ (W or cell) _____

Contact email: _____ ADDRESS _____

CITY _____ ZIP _____ Payment: CASH CHECK CREDIT CARD

Circle Session: March April 10-May 1 May June July Aug \$24/session Total AMT: _____

Credit Card Number: _____ 3 or 4 Security Code: _____ Expiration Date: _____

Card Holders Signature: _____

Please list any special needs or equipment participant may need: _____

Liability Waiver: The undersigned acknowledges that recreational and sports programs involve inherent risks of personal injury. It is agreed that participation in the program is voluntary and at the participant's sole risk. The City shall not be liable for any claims, demands, injuries or damages whatsoever to the participant or participant's property arising out of the participant's participation in the program. On behalf of the participant, the undersigned releases and discharges the City, its employees or agents from all such claims, demands, injuries or damages, except those directly caused by the gross negligence of the City, its employees or agents. **Photographs** are occasionally taken and may be used for promotional purposes of the recreation programs we offer. If you wish not to be photographed, check here ____

Signature Participant or guardian, if participant is under 18 : _____ **Date:** _____