



# WELCOME TO ENERGY!

TODAY'S DATE \_\_\_\_\_, 2020

## WHAT BRINGS YOU IN TODAY?

### Group Fitness

- \$25 Single Class (ages 12 and up)
- "Just Try It!" Two Weeks' Group Fitness \$25\*

*\*Must live in MN/WI. One Per Person. Must be new to studio. Not available for out-of-town guests, visitors or visiting college students. Cannot be combined with any other promos or offers.*

- \$180 One-Month Unlimited
- \$99 Out-of-Towner Guests (8 days unlimited)

*We also offer group fitness e-punch cards, VIP memberships (with educator and military discounts).*

### Personal Training

- One Free Session (health questionnaire online)

### Pilates Reformer Demo

- One Free Session

## PLEASE PRINT LEGIBLY

Name: \_\_\_\_\_

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

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

**This is where I currently reside:**  Yes  No

DOB: Month \_\_\_\_ Day \_\_\_\_ Year \_\_\_\_ (our secret)

Cell Phone: \_\_\_\_\_

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

Print write legibly

Emergency Contact & Cell: \_\_\_\_\_

## IF APPLICABLE, WHAT CLASS ARE YOU TAKING TODAY:

### KIDS' TRAINING / PRIVATE GYMNASTICS

Child's Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_

Child's Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_

- 1 Session (\$40) \*\*All sessions for one child
- 5 Sessions (\$190)
- 10 Sessions (\$370)
- 20 Sessions (\$700)
- Acro Class \$25
- OTHER: \_\_\_\_\_

\*PLEASE ASK FRONT DESK FOR ONLINE REGISTRATION INFO & PROCEDURE FORM.

Please complete reverse side.

## HOW DID YOU HEAR ABOUT ENERGY?

- Internet Search    Drive By    Member    Friend  
 Other: Please let us know ↓
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*We urge all individuals to obtain a physical examination from a doctor before using any exercise equipment or participating in any exercise class. All exercises, including the use of weights and use of any and all machinery, equipment, and apparatus designed for exercising shall be at the individuals' sole risk. I understand that the agreement to use, or selection of exercise programs, methods and types of equipment shall be my entire responsibility at own risk, and Energy shall not be liable to any person for any claims, demands, injuries, damages, or actions arising due to injury to guest or member's person or property arising out of or in connection with the use by person of the services, facilities, and premises of the Energy. I hereby holds Energy, its officers, owners, agents and employees for any such injuries or claims.*



**Signature:** \_\_\_\_\_

### OFFICE USE ONLY

**Paid today:**    Cash    Check Number \_\_\_\_\_    Credit Card    Gift Card    Cash    Other \_\_\_\_\_

**Form taken by (your name)** \_\_\_\_\_   Was this person entered name into group fitness class: **YES**  **NO**

- |  |  |
|--|--|
| <input type="checkbox"/> Emergency contact added:                      | <b>YES</b> <input type="radio"/> <b>NO</b> <input type="radio"/> |
| <input type="checkbox"/> Address & Account info entered into Mindbody: | <b>YES</b> <input type="radio"/> <b>NO</b> <input type="radio"/> |
| <input type="checkbox"/> Billing Address is in cc information cell:    | <b>YES</b> <input type="radio"/> <b>NO</b> <input type="radio"/> |
| <input type="checkbox"/> Proofread, no errors and punctuation correct: | <b>YES</b> <input type="radio"/> <b>NO</b> <input type="radio"/> |
| <input type="checkbox"/> ID Date of First Visit and initials added:    | <b>YES</b> <input type="radio"/> <b>NO</b> <input type="radio"/> |

***Put completed form to Kara's file.***

**NOTES:**