



**Enrollment Form**

Please fill out this form and email to Jeff at jlaynes@aol.com

Contact Information

First Name       Last Name

Address       City       State       Zip

Email       Telephone       Mobile

Emergency Contact Name       Telephone       Relationship

Personal Information

This information will help customize the fitness session to ensure each participant will more likely achieve success.

Gender [ ]  Male [ ]  Female Age       Height       Estimated weight

Approximate fitness level

 [ ]  Beginner (Just starting or reestablishing your fitness routine)

 [ ]  Intermediate (Currently exercising one-two days weekly)

 [ ]  Advanced (Currently exercising three or more days weekly)

 [ ]  Professional (Advanced athlete training for a specific sport)

Fitness Information

*Camp*—please write your preferred first day of Boot Camp. Each Camp lasts 30-sessions, and can start on Monday, Wednesday, or Friday. Start date:

*Camp Time*—please select your Boot Camp time. Participants must attend only the Camp time for which they have signed-up.

[ ]  6:00-7:00 am [ ]  6:30-7:30 pm