



**YMCA** of  
Greater Cincinnati

Health and Fitness Training

**2008 Training Registration Form, Fall**

(Please Print)

Name \_\_\_\_\_ Sex \_\_\_\_\_ SS# \_\_\_\_\_

Birth Date \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Home Address \_\_\_\_\_ City, State & Zip \_\_\_\_\_

YMCA Association and Branch Name \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Title \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone# \_\_\_\_\_

Please select the classes you will be attending and place JV# here: \_\_\_\_\_

Healthy Lifestyles Principles.....\$25./45.\*

Foundations of Group Exercise.....\$40./60.\*

Foundations of Group Cycling.....\$40./90.\*

Pilates Instructor.....\$40./90.\*

Foundations of Strength & Conditioning.....\$65./95.\*

Yoga Workshop.....\$25./45.\*

Interval Training CEC.....\$25./45.\*

Circuit Training CEC.....\$25./\$45\*

Rubber Resistance CEC.....\$25./\$45\*

\*Staff of Great Miami Valley and Greater Cincinnati are lower price and all others are higher price.

Participant's Signature \_\_\_\_\_ Date \_\_\_\_\_

JV# \_\_\_\_\_ (for YMCA of Greater Cincinnati Branches only)

Mail registration form, proof of prerequisites and payment to:

YMCA of Greater Cincinnati  
Attn: Sue Klosterman  
2495 Langdon Farm Rd.  
Cincinnati, OH 45237  
[sklosterman@cincinnatiymca.org](mailto:sklosterman@cincinnatiymca.org)  
Phone: 513-362-2061  
FAX: 513-351-3555