



Northampton Aquatic & Family Center
at JFK Middle School, 100 Bridge Road, Florence, MA 01062



Monday Evening Yoga Spring 2020 Session IV



Yoga instructor, Beth T., will introduce and break down a variety of basic yoga poses to help you feel stronger and more flexible, making movement freer and easier. We'll also explore breathing and meditation practices to help quiet your mind so you feel more relaxed and peaceful.

Participants will need to provide their own yoga mat

MONDAY EVENING CLASSES: 6:00 - 7:15 PM

Location: Aquatic & Family Center

**Dates: April 27 – June 22 (8 Classes)
(No class May 25)**

Fee: \$60/ \$65 / \$75

(Walk in fee: \$8 / \$10 / \$12)

Fees listed in the order of AFC Member / Resident / Non-Resident

Registrations accepted at the AFC at JFK Middle School, 100 Bridge Road, Florence, MA 01062
Mon-Fri 4:00-8:00pm & Sat 10am-5pm and Sun 11:00am-4:30pm, 587-1046

or
Northampton Parks & Recreation Department, 100A Bridge Road, Florence MA 01062
Mon-Fri 8:30am-4:30pm 587-1040
www.northamptonma.gov/recreation

REGISTRATION FORM ON REVERSE SIDE

NORTHAMPTON PARKS & RECREATION DEPARTMENT - REGISTRATION FORM

Today's Date: ____/____/____

PLEASE PRINT LEGIBLY

New to Northampton Parks & Recreation I have updated my Information

<p>ADULT 1</p> <p>Name _____</p> <p>Address _____</p> <p>City _____ St _____ Zip _____</p> <p>Phone: (H) (____) _____ (W) (____) _____</p> <p>Cell (____) _____</p> <p>Email: _____</p>	<p>ADULT 2</p> <p>Name _____</p> <p>Address _____</p> <p>City _____ St _____ Zip _____</p> <p>Phone: (H) (____) _____ (W) (____) _____</p> <p>Cell (____) _____</p> <p>Email: _____</p>
--	--

EMERGENCY CONTACT OTHER THAN PARENT

Name _____

Phone (____) _____

Photo Release: May Northampton Parks & Recreation Department use photos of you or your family members for brochure, website, promotional use?

Yes No

PARTICIPANT'S FULL NAME: _____ Gender ____ Date of Birth ____/____/____

Program Name	Session	Day(s)	Level	Start Date	Basic Fee	Non-Res Fee <small>(where applicable)</small>	Total Fee
					\$	\$	\$
					\$	\$	\$
TOTAL FEE FOR PARTICIPANT							\$

PASS PURCHASE

Pass	Pass Type	Pass Length	Fee	Special Considerations/Comments <small>(Use separate sheet of paper if necessary)</small>												
Aquatic Center	<table style="width: 100%; border-collapse: collapse; font-size: small;"> <tr> <td style="border: none;">Res:</td> <td style="border: none;">Adult</td> <td style="border: none;">Family</td> <td style="border: none;">Senior</td> <td style="border: none;">Youth</td> </tr> <tr> <td style="border: none;">Non-Res:</td> <td style="border: none;">Adult</td> <td style="border: none;">Family</td> <td style="border: none;">Senior</td> <td style="border: none;">Youth</td> </tr> </table>	Res:	Adult	Family	Senior	Youth	Non-Res:	Adult	Family	Senior	Youth	<table style="width: 100%; border-collapse: collapse; font-size: small;"> <tr> <td style="border: none;">6 Month</td> <td style="border: none;">12 Month</td> </tr> </table>	6 Month	12 Month	\$	_____ _____ _____ _____ _____
Res:	Adult	Family	Senior	Youth												
Non-Res:	Adult	Family	Senior	Youth												
6 Month	12 Month															
Pass Holder's Name(s)	Gender	DOB	Pass/Tag# Issued													
_____	_____	_____	_____													
_____	_____	_____	_____													
_____	_____	_____	_____													
_____	_____	_____	_____													
TOTAL AMOUNT DUE				\$												

Recreational and Volunteers Activities Release Form

I, the undersigned, do hereby consent to my participation in voluntary or recreation programs of the City of Northampton. I also agree to forever release the City of Northampton, and all their employees, agents, board members, volunteers and any and all individuals and organizations assisting or participating in any voluntary or recreation programs of the City of Northampton from any and all claims, rights of action and causes of action that may have arisen in the past, or may arise in the future, directly or indirectly, from personal injuries to myself or property damage resulting from my participation in the City of Northampton voluntary activities or programs.

I also promise, to indemnify, defend, and hold harmless the Releasees against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, arising from personal injuries to myself or property damage resulting from participation in the City of Northampton voluntary activities or recreation programs.

I further affirm that I have read this Consent and Release Form and that I understand the contents of this Form. I understand that my participation is voluntary and that I am free to choose not to participate in said programs. By signing this form, I affirm that I have decided to participate in the City as a volunteer or in its recreation programs with full knowledge that the Releasees will not be liable to anyone for personal injuries and property damage that I may suffer in voluntary activities with the City of Northampton or recreation programs.

Participant Signature or Parent/Legal Guardian if under 18 years old: _____ Date: _____

Charge my VISA ____ Master Card ____ Discover ____ Card # _____ Expiration _____

Name on Card _____ Signature _____

Office Use Only: Amt Rec'd \$ _____ Cash ____ Check # _____ Credit ____ Date _____ RT Date _____ Staff _____