

CLASS LOCATION: _____ TIME OF CLASS: _____

Name: _____

Email Address: _____ Phone: _____

Congratulations on staying committed to a healthier you!

In order to process your registration to continue in the StrongBodies program, please complete the form below and submit cash or a check for \$30 made payable to: UW-Extension.



Demographics:

F M Prefer not to Answer

Which of the following do you identify with? (Check one)

Hispanic or Latino Not Hispanic or Latino Prefer not to Answer

Check the race or races you identify with. (Check all that apply) Prefer not to Answer

White African American Asian American Indian Hawaiian/Asian Pacific

1. In case of emergency, please contact: _____
Their telephone number is: _____
2. Has anything changed in your Medical History or Current Health since last completion of your Strong Women paperwork? No Yes
(If yes, please request new "Medical History and Current Health Survey Form")
3. Have you voluntarily enrolled in the Strong Women program?
 No Yes
4. Do you understand that there are risks to a program associated with exercise which may include muscle soreness, fainting, disorders of heartbeat, abnormal blood pressure, and in very rare instances, heart attack? No Yes
5. Do you release everyone who has designed, promoted, or conducted the Strong Women program from all claims, or liabilities whatsoever resulting from your participation?
 No Yes
6. Do you assume all risks and responsibility for any injury, damage, or any other adverse event that may result from your participation in this program?
 No Yes
7. Do you agree to be photographed in class with the potential that your photo may be utilized in promotional materials? No Yes
8. Are you committed to completing the entire program by missing as few of the sessions as possible? No Yes

Signature _____ Date _____

An AA/EEO employer, the University of Wisconsin-Extension provides equal opportunities in employment and programming including Title VI, Title IX and ADA requirements.

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Please make requests for reasonable accommodations to ensure equal access to educational programs as early as possible preceding the scheduled program, service or activity. This document can be provided in an alternative format by calling (608) 757-5066 (voice) (711 for Wisconsin Relay).