

## Just Aerobics, Inc.

29 Montauk Court \* Baltimore, MD 21234

(410) 529-4645 \* Fax (410) 529-4646

[JSAROBX@AOL.Com](mailto:JSAROBX@AOL.Com)

	Monday	Tuesday	Wednesday	Thursday
Hiss United Methodist Church	<b>Boot Camp</b> 6pm (Penny)	<b>Boot Camp Challenge</b> 6pm (Lisa)	<b>Step and Tone</b> 6pm (Penny)	<b>Cardio Camp</b> 6pm (Lisa)
<b>Begins</b> <b>1/4/2012</b>  <b>FEE: \$65</b> Unlimited classes	<b>Tone and core with mat pilates</b> 7pm (Lisa)	<b>Pilates</b> 7pm (Lisa)	<b>Body Bar Challenge</b> 7pm (Penny)	<b>Pilates</b> 7pm (Lisa)

### JUST AEROBICS 2012 WORKOUT REGISTRATION

Send completed registration form, along with check made payable to Just Aerobics, Inc., and mail to address above or register at first class. (Cash also accepted)

I, the undersigned, am aware that I am engaging in an aerobics class. I understand that this class is a total fitness regimen consisting of high and/or low impact activity with or without the use of any aerobic equipment. I recognize that I am participating at my own risk and will not hold liable any location that hosts Just Aerobics, Inc., Just Aerobics, its instructors or Jeanne Baker for any possible injury, either incurred at the time or as a future result of my efforts during the class. PLEASE PRINT LEGIBLY:

NAME: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

Please put a check mark by your address if it is new!

CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_ TOTAL PAID: \_\_\_\_\_

SUGGESTIONS: \_\_\_\_\_