



C. R. E. W.  
community resource enrichment wellness

## “B<sub>oot</sub> C<sub>amp</sub>” / “G<sub>ym</sub> n S<sub>wim</sub>”

*Start every Monday, Wednesday and Friday mornings off with a workout for all levels! Participants have the use of open gym, pool, weight room and participation in Boot Camp class from 5:15-6:15 am. Boot Camp is a workout to push your limits and challenge yourself. No two classes are ever the same! Guaranteed to make you sweat and give you a total body workout. Expect everything from cardio, core, strength training, speed, agility and even some surprises!*

***November/December 2019***

***Begins at 5:15 am Monday, Wednesday & Friday***

***Choose between the pool, weight room, gym or participate in the Boot Camp Class***

**Cost: \$8 just drop in**

**\$45 for Pool Members & Senior Citizens (2 month session)**

**\$55 for non-Pool Members (2 month session)**

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**If school is closed due to holidays, weather or other reason;  
class is canceled and will not be rescheduled**

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### **BOOT CAMP**

**\*\*\*SIGN UP FORM and WAIVER AND RELEASE FROM LIABILITY\*\*\***

By this Waiver, I assume any risk, and take full responsibility and waive any claims of personal injury, death or damage to personal property associated with **Lodi School District Recreation and Education Program** activities and events organized by **The School District of Lodi**.

I understand and confirm that by signing this WAIVER AND RELEASE I have given up considerable future legal rights. I have signed this Agreement freely, voluntarily, under no duress. My signature is proof of my intention to execute a complete and unconditional WAIVER AND RELEASE of all liability to the full extent of the law. I am 18 year of age or older and mentally competent to enter into this waiver.

**I agree to social media postings of pictures and video.**

Participant Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_

\*Participant Signature: \_\_\_\_\_ \*Date: \_\_\_\_\_

*f Participant is under 18 years of age:*

Parent/Guardian Name: \_\_\_\_\_

\*Parent Signature: \_\_\_\_\_ \*Date: \_\_\_\_\_