

# **Portland Parks & Recreation**

**P.O. Box 71**

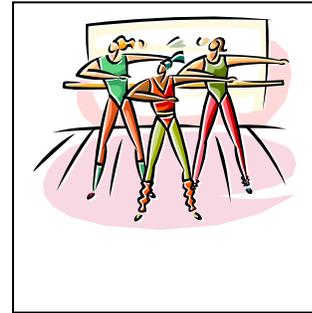
**Portland, CT 06480**

**860-342-6757**

**860-342-6763 Fax**



## **Winter ZUMBA!**



**Zumba** is an  
exhilarating,

effective, easy-to-follow, Latin-inspired, calorie-burning  
dance fitness-party that's moving millions of people toward  
joy & health!

***FREE Class Jan. 4<sup>th</sup>***

Day: Wednesdays

**10-Week Session**

Dates: January 11 to March 15

Instructor: **Val Swiantek**

Winter Site: Valley View Gym

Time: 6:15 to 7:15 p.m.

\$50 for a 10 week session!

Or drop-In for \$7 per class

***Please enter & depart through front door of Valley View, thank you***

Parks & Recreation Hot Line for updates & Cancellations: 860-262-7234

***\*ZUMBA\*ZUMBA\*ZUMBA\*ZUMBA\*ZUMBA\****

**ADULT FITNESS INFORMATION WAIVER**

**PORTLAND PARKS AND RECREATION**

Po Box 71, 265 Main Street, Portland, CT 06480 Phone: 342-6757 Fax: 342-6763

[www.portlandct.org](http://www.portlandct.org)

Participant's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Street Address \_\_\_\_\_ Apt. # \_\_\_\_\_ Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Emergency Contact (If Desired): \_\_\_\_\_

Home Phone # \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone # \_\_\_\_\_

**In case of an emergency, may we transport via ambulance? Please circle: Yes      No**

	<u>Program(s)</u>	<u>Date &amp; Time</u>	<u>Fee</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

TOTAL \_\_\_\_\_

I hereby agree to hold harmless the Town of Portland and its agents for any accidental injury caused by participation in any Town of Portland sponsored activities. In signing this form, it is understood that Portland Parks and Recreation Department and the Town of Portland DO NOT assume responsibility for accidents and the participant(s) agree(s) to abide by all rules and regulations set by the Portland Parks and Recreation Department.

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)