



REGISTRATION FORM

NORTH SHORE WEIGHT LOSS CHARITY CHALLENGE

Registration for North Shore Challenge

Registration for Burnaby Challenge

First Name: _____ Last Name: _____

Street Address: _____

City: _____ Province: _____ Postal: _____

Home Phone: _____ Fax: _____ Cell: _____

Email: _____ Male Female Shirt Size: _____

Emergency Contact Name: _____ Phone: _____

Are you registering with a corporate team? Yes No

How many people are you registering? _____

What is your company name? _____

What is your current fitness level? Inactive Moderately active Athlete

How did you hear about the challenge? _____

STEPS IN REGISTERING FOR THE WEIGHT LOSS CHALLENGE

1. Fill out this form and fax to 604-929-SOUL.
2. Refer to our website www.soulfitness.com for dates, times and program information.
3. To pay you may use:
 - a) Paypal which is available on our website which offers debit, MasterCard or Visa options.
 - b) Drop off a cheque to the Soul Fitness Studio.
4. **No mail in registration.**
5. All participants must fill out an intake and par-Q form on the 1st day.
6. Soul Fitness recommends all participants to receive medical clearance before starting an exercise program.
7. Go to www.soulfitness.com to download your pledge sheet.
All pledges will be donated to The Heart & Stroke Foundation.
8. No refund within 30 days of program start date.

I agree to the above terms.

Signature: _____ Date: _____