



Zumba is a fun and energetic dance/fitness workout that feels like a party. You don't even have to know how to dance; just move your body and follow my lead. Zumba combines hypnotic Latin rhythms and easy to follow moves to create a dynamic workout that will blow you away. Experience one hour of calorie-burning, heart-racing, body-energizing, and inspiring movements. The routines feature interval training sessions where fast and slow rhythms and resistance training are combined to tone and sculpt your body while burning fat. Registrations must be handed in to the office, not to the instructor, at the address listed below before you start attending classes.

**Fee:** \$45 per 8-week session (choose to attend up to two classes per week) No makeup classes are offered if you choose not to attend both classes per week.

**Dates and Times:** 6:00-7:00 PM or 7:00-8:00 PM – Tuesday and Thursday  
9/10-10/31, 9/9 – 11/5-12/26 – 1/7-2/27 and 3/4-4/24

**Location:** Upper Southampton Community Center: 913 Willow Street Southampton, PA

**Wear comfortable clothes and sneakers! Bring lots to drink because this class will make you move!**

**Any questions about this program please feel free to call 215-355-9781**

## Upper Southampton Township Registration Form

(Please Return Completed Form to Parks & Recreation Department, 913 Willow Street, Southampton, Pa 18966)

|  |  |   |                 |   |                   |
|--|--|---|-----------------|---|-------------------|
| Registrant's Last Name   |  | Registrant's First Name   |                 | Phone Number  |                   |
| Street Address   |  | City, State, & Zip Code   |                 | Alternate Phone   |                   |
| Health Problems/Allergies  |  | Date of Birth   |                 | Email Address   |                   |
| Parent's Name(s) (If minor Child)  |  | School  |                 | Current Age   | Gender      Grade |
| Physicians Name  |  | Phone Number  |                 | Resident of Upper Southampton Township CIRCLE ONE: YES NO |                   |
| Emergency Contact & Relationship   |  | Phone Number  |                 | Relationship  |                   |
| Program Title (One per form)   |  |   | Start Date      |   | Fee               |
| Credit Card (Circle One)   |  | Account #   | Expiration Date |   | Security Code     |
| VISA MC  |  |   |                 |   |                   |
| Name on Card   |  | Phone Number  |                 | Billing Address   |                   |
| ___ 9/10 – 10/31 - 6:00-7:00 PM<br>___ 9/10 – 10/31 - 7:00-8:00 PM<br>___ 11/5 – 12/26 - 6:00-7:00 PM<br>___ 11/5 – 12/26 - 7:00-8:00 PM<br>___ 1/7 – 2/27 - 6:00-7:00 PM<br>___ 1/7 – 2/27 - 7:00-8:00 PM<br>___ 3/4 – 4/24 – 6:00-7:00 PM<br>___ 3/4 – 4/24 – 7:00-8:00 PM |  | All Participants are required to sign this form. Please check with your doctor before registering in any fitness or exercise program. I, the parent or guardian of the above minor or myself, submit that my child/I is/am able to participate in the above activity and wave Upper Southampton Township, its staff and affiliates of any responsibility of injury or illness. This program is facilitated by the Parks & Recreation Department. Photos may be taken of any of our Upper Southampton Township activities and used for promotions for future events. If you do not want your picture and/or your child's picture taken or published please send a letter and or e-mail addressing this concern to <a href="mailto:Adminstartion@ustwp.org">Adminstartion@ustwp.org</a> |                 |   | Date              |
|  |  | Signature   |                 |   |                   |