

# WATER AEROBICS



Water workouts are a great way to increase your range of motion and are less stressful on joints and muscles than land exercises. Our water aerobics class, which is suitable for all fitness levels and ages, combines cardio conditioning, muscle toning and stretching. Buoyancy belts and hand weights are incorporated into each workout. Swimming skills are not required. *Interested in trying the class out before you pay, contact Carrie at 234- 8435. This class may also be suitable for individuals after orthopedic surgeries - Ask your Dr. first!*

## DAYTIME CLASSES

**WHERE:** Byron High School Swimming Pool (Door #10)

**WHEN:** Tuesday & Thursdays (6 wks)

CODE	DATES	TIME
220310-D1	Jan. 10 - Feb. 16	9:15 - 10:15 am
320310-D1	May 15 - June 21	9:15 - 10:15 am

*Class Times may change slightly in June*

**FULL FEE (Res/Non):** \$52/\$58

**HALF FEE (Res/Non):** \$30/\$35 (attend only 6 classes)

**INSTRUCTOR:** Sandra Guedel

**REGISTRATION DEADLINES:** Mon. 1/2 & 5/7

\*Register before the deadline and receive a \$5 discount



## EVENING CLASSES

**WHERE:** Byron High School Swimming Pool (Door #10)

**WHEN:** Monday & Wednesdays (6 wks)

CODE	DATES	TIME
220310-E1	Jan. 9 - Feb. 15	7:15 - 8:15 pm
220310-E2	Feb. 20 - March 28	7:15 - 8:15 pm
320310-E1	April 9 - May 16	7:15 - 8:15 pm
320310-E2	May 21 - June 27	7:15 - 8:15 pm

*No Class on 5/28; Class Times will change to 6:15 - 7:15 in June.*

**FULL FEE (Res/Non):** \$52/\$58

**HALF FEE (Res/Non):** \$30/\$35 (attend only 6 classes) within a session

**INSTRUCTOR:** Sandra Guedel

**REGISTRATION DEADLINES:** Mon. 1/2, 2/13, 4/2, & 5/14

\*Register before the deadline and receive a \$5 discount

## WATER AEROBICS

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

**Mark the class you are registering for:**

*\*\$5 discount if you register before deadlines 1/2, 2/13, 4/2, 5/7, 5/14*

**Full fees for all sessions are \$52/\$58; Half fees are \$30/\$35**

\_\_\_\_\_ Morning 1/10-2/16 Full

\_\_\_\_\_ Morning 5/15-6/21 Full

\_\_\_\_\_ Evening 1/9-2/15 Full

\_\_\_\_\_ Evening 2/20-3/28 Full

\_\_\_\_\_ Evening 4/9-5/16 Full

\_\_\_\_\_ Evening 5/21-6/27 Full

\_\_\_\_\_ Morning 1/10-2/16 Half

\_\_\_\_\_ Morning 5/15-6/21 Half

\_\_\_\_\_ Evening 1/9-2/15 Half

\_\_\_\_\_ Evening 2/20-3/28 Half

\_\_\_\_\_ Evening 4/9-5/16 Half

\_\_\_\_\_ Evening 5/21-6/27 Half

### RELEASE OF LIABILITY STATEMENT

In consideration of me (or my child/ward) being allowed to enroll in this course(s), I hereby personally assume all risks in connection with this activity and I release the instructors, supervisors, owners and the Byron Park District for any injury or damage and further I save and hold harmless the instructors, supervisors, owners and the Byron Park District from any claim by me, my family, estate, heirs, or assigns, arising out of my enrollment and participation.

I have read and fully understand the above program details and waiver release of all claims.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

**BYRON PARK DISTRICT PO BOX 423 BYRON, IL 61010 234-8435**