

CLASS REGISTRATION FORM

Name _____ Date _____

Address _____

City _____ State _____ Zip _____ Birthday Month _____

Email _____ Phone (Cell) _____

What is the best way to contact you in the event of a cancelled class? _____

Initial here to acknowledge that you have read the make-up, cancellation and refund policies.

SPRING SESSION 2026 CLASSES:

(All classes are 12 weeks, except Mondays are 11 weeks)

8:30 am Pedal, Pump & Pilates - Suzy Stout (75-min)	\$198/\$22*
Monday 5:30 pm Pilates- Zoe Whitt (60 min)	\$165/\$18*
Tuesday 5:30 pm Spin Circuit-Suzy Stout (60 min)	\$180/\$18*
Wed 8:30 am Strengthen & Lengthen -Suzy Stout (85 min)	\$240/\$25*
Wednesday 9:15am Pilates Circuit only-Suzy (45 min)	\$144/\$15*
Wednesday 5:30 pm StrengthXPilates-Zoe Whitt (60 min)	\$180/\$18*
Thursday 5:30 pm Hustle & Muscle-Zoe Whitt (45 min)	\$180/\$18*
(*indicates pay per class drop in rate)	
Saturday Spin Class (drop in only)	\$15/class

5% discount for 3 or more classes (WITH THE SAME INSTRUCTOR ONLY)

Total amount due to Suzy Stout: _____

Total amount due to Zoe Whitt: _____

Form of payment (circle): Check Cash Credit card Venmo Zelle Paypal
Payment is due no later than the first class! Credit card must be presented.
Please make checks payable to Suzy Stout or Zoe Whitt based on class.

Please list any present or past injuries or health conditions below:

Emergency Contact Information:

Name of Emergency Contact: _____

Relationship to you: _____ Phone number: _____