



Breakout Bootcamp Registration

Name: _____

Address: _____

Phone: _____ Cell: _____

Email: _____ Male/Female: _____

Date of Birth: _____ Age: _____

Emergency Contact: _____

Emergency Contact Phone: _____

How did you hear about the boot camp?

Boot Camp Sessions

3 - 1 hour sessions per week for 4 weeks \$150.00

Return Boot Campers SAVE 10% **\$135.00**

Date: _____ **to** _____

_____ 6:00 – 7:00 a.m. Tuesday/Wednesday/Friday

_____ 10:00 – 11:00 a.m. Tuesday/Thursday/Friday

_____ 6:30 – 7:30 p.m. Monday, Tuesday, Thursday

AMOUNT PAID: _____ DATE: _____ CASH/CHEQUE: _____

Phone: 604-807-4478

getfit@breakoutbootcamp.com