

Registration Form

Winter 2010

OFFICIAL USE ONLY
____/____/____

Register online at www.nsymca.org.

Fax-in/Drop-off Registration Dates:

- **Member registration begins**
Monday, November 30, 2009 7:00 AM
- **Open registration begins** the following
Monday, December 7, 2009 at 7:00 AM

NSYMCA fax number: 847-272-7801
Drop off (during regular hours): North Suburban YMCA, 2705 Techny Road, Northbrook, IL 60062

Registrants will be given confirmation of their classes within three to five days of registering.

Please note your class or program will not be guaranteed until you receive confirmation.

Please print legibly using blue or black ink. You may use the same form for more than one member of the same family.

Last Name: _____

Address: _____

City: _____ Zip: _____

Home Phone: _____

Emergency Phone: _____

E-mail Address: _____

I wish to receive confirmation/status of my class choices by (check one):

- Phone Call E-mail

Choice	Class Name	Fee	Day	Time	Participant's First Name & DOB	Gender	
						M	F
1st							
2nd							
1st							
2nd							
1st							
2nd							
1st							
2nd							
Total all class fees		\$					

Classes with less than the minimum number of participants are subject to cancellation. Prices are subject to change. If the YMCA cancels a class, every effort will be made to accommodate a participant into another class. Full refunds are available if the YMCA cancels a class.

Policies

- Membership must remain current throughout the entire class period to qualify for member rates.
- A full refund will be issued if you cancel prior to the registration deadline or if the YMCA cancels a class. Refunds will be given by check or YMCA credit voucher only.
- **Registration received after the registration deadline of Sunday, December 27, 2009 at 5:00 PM will be assessed a \$10 late fee for each class.**
- Refer to the brochure for complete registration policy.
- The North Suburban YMCA does not turn away anyone due to the inability to pay. If you need assistance, please stop by the Customer Service Desk.
- If you would like to contribute to the Strong Kids Campaign, please contact Howard Schultz, Executive Director, at 847-272-7250, ext 1213.

Waiver

I agree to abide by the facility, program and membership policies of the NSYMCA at all times while on the premises. This waiver also allows the NSYMCA to use my image if caught on film, for the purpose of advertising and marketing.

Signature: _____

Payment Information

Type of Card:    

Credit Card #: _____

Expiration Date: _____

Charge Amount (all fees and dues): \$ _____

Name on Card: _____

Transaction Signature: _____