SharkFitness Program will provide you with the training tools to take a bite into Summer Shape. Your campus Fitness Center will help you get in shape for summer. Call 305-237-2838

ON CAMPUS FITNESS AMENITIES INCLUDE:
• State of the Art Equipment
• Free Weights
• Professional and Friendly Staff
• CORE Strengthening
• Training Topic Sessions: Exercise of the Week
• Full array of Fitness and Health Assessments
• Machine Orientations
• Nutrition and Exercise Consultations

EXERCISE YOUR OPTIONS TO WORK OUT, BE HEALTHY, FEEL GREAT AND GET RESULTS!

ONLY $60.00 FOR THE YEAR, $30.00 TERM OR $10.00 A MONTH.
No Contracts Required.

COMPLIMENTARY
1 ROCK HARD ABS CLASS
Visit the Fitness Center for class days and times Gibson Center, Room G139

COMPLIMENTARY
Body Composition Test
Visit the Fitness Center to schedule an appointment Gibson Center, Room G139

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Are you Summer 2012 Beach Body Ready?

Please bring complete form along with payment to the bursar's office to the campus where you are planning to use the facilities.

Date: ________________________ Membership begins: _____________________________ MDCID No. _______________________

Name: ____________________________________________________________________________ Male     Female

Day Phone No. : _________________________________________ Evening Phone No.: _____________________________________

Street Address:          _______________________

City:  ___  State:     ___  Zip:   _______

Mailing Address:          _______________

(If different from Street Address)

Email Address:

Emergency Contact:     _____________  Phone:    ________

I, the undersigned, desire to voluntarily participate in the above named Miami Dade College program/memberships at the listed location on stated dates. I understand that participation in the program/memberships provided or use of the facility where the program/memberships is located, may result in injury to me and/or my dependent(s). I hereby waive any and all claims that I and/or my dependent(s) may have gained against the Board of Trustees, officers, agent or employees of Miami Dade College for any injury resulting from my participation at the listed location. To the best of my knowledge, I and/or dependent(s) are in good health and physically capable of actively participating in the above named program/memberships. Please note fees are not refundable.

Membership form and receipt of payment provided by Bursar must be presented at the Fitness and/or Aquatic Center on your first visit to be properly registered.

Member Signature:        Date:   ________________________

Membership Type:

(Choose one only)

1. Fitness Membership Only
   - Credit Students (p/t and f/t)   $10  $30       $60
   - Employees/Retirees (p/t and f/t)   $20  $60     $120
   - Non-Credit Students    $30  $90    $180

2. Aquatic Membership Only
   - Credit Students (p/t and f/t)   $10  $30      $60
   - Employees/Retirees (p/t and f/t)   $20  $60     $120
   - Non-Credit Students    $30  $90    $180

3. Fitness/Aquatic Membership
   - Credit Students (p/t and f/t)   $20    $50   $100
   - Employees/Retirees (p/t and f/t)  $40  $100   $200
   - Non-Credit Students    $60  $150   $300

Bursar's receipt number:  _______________   ___________