

REGISTRATION FORM



DATE

CLIENT INFORMATION

NAME

PHONE PREFER: TEXT CALL

EMAIL

EMERGENCY CONTACT NAME AND NUMBER

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MY GOAL:

PROGRAM:

- SUP BEGINNER LESSON
- SUP BOARD FITNESS
- B-BOARD FITNESS
- STAIR CLIMBING FITNESS
- PUSH UP CLUB

COMMUNITY

- SUP GUELPH WEEKLY PADDLE
- SUP GUELPH DAY TRIP PADDLE
- SUP GUELPH OFF SEASON SOCIALS
- SUP GUELPH VOLUNTEER

ADDITIONAL
INFORMATION