

H₂O~FIT Program Registration

Name: _____

Home Tel: _____

Email: _____

1. **Select (✓) the location and number of classes per week.**

Location	Fees (including g.s.t.)
GH2O Fitness	
1 class per week	36.79 per month <input type="checkbox"/>
2 classes per week	69.25 per month <input type="checkbox"/>
3 classes per week	97.39 per month <input type="checkbox"/>
Eunice's Swim School	
1 class per week	36.79 per month <input type="checkbox"/>
2 classes per week	69.25 per month <input type="checkbox"/>
Westin Harbour Castle	Include Towels
1 class per week	40.69 per month <input type="checkbox"/>
2 classes per week	77.04 per month <input type="checkbox"/>
3 classes per week	109.07 per month <input type="checkbox"/>

Check here if you want to **cancel classes during July and August.** Monthly fees will automatically be cancelled for these months, and your class days and times will be reserved for September.

PAD plan begins _____

2. **Select (✓) the class days and times.**

	Monday	Tuesday	Wednesday	Thursday	Friday
GH2O Fitness	9:30 a.m. <input type="checkbox"/> * 10:30 a.m. <input type="checkbox"/>	* 10:30 a.m. <input type="checkbox"/>	9:30 a.m. <input type="checkbox"/> * 10:30 a.m. <input type="checkbox"/> 6:30 p.m. <input type="checkbox"/>	9:30 a.m. <input type="checkbox"/> * 10:30 a.m. <input type="checkbox"/>	
Eunice's Swim School			10:30 a.m. <input type="checkbox"/>		* 9:00 a.m. <input type="checkbox"/>
Westin Harbour Castle	6:00 p.m. <input type="checkbox"/> * 7:00 p.m. <input type="checkbox"/>	9:30 a.m. <input type="checkbox"/> * 10:30 a.m. <input type="checkbox"/>	6:00 p.m. <input type="checkbox"/> * 7:00 p.m. <input type="checkbox"/>	10:30 a.m. <input type="checkbox"/> * 11:30 a.m. <input type="checkbox"/>	* 10:30 a.m. <input type="checkbox"/>

* During July and August, these classes are cancelled.

3. **Complete a Par-Q and Waiver form(s).**

4. **Complete Payor's PAD Agreement with VOID cheque**

Details of pre-authorized debit (PAD) plan:

The PAD Plan Agreement authorizes our financial institution to withdraw fees (indicated above) from your financial institution on the 1st of each month (attach a blank personal cheque marked VOID). Your blank cheque will provide your account information for processing each monthly debit.

Important Note: Withdrawal from the H₂O~FIT program requires written notice by the 15th day of the previous month prior to the next month's debit (written notice by mail, fax or email is acceptable).

5. **Mail forms and VOID cheque to:**

H2O~FIT
34 Laurentide Drive
Toronto, Ontario
M3A 3C7

Tel: 416-449-0900
Fax: 416-445-3339
Email: h2ofit@rogers.com
Website: www.h2ofit.com