

KINESIS INTEREST FORM

Please complete and return

Name: _____ **Phone:** _____

e-mail: _____

How would you describe your current fitness/experience level?

Beginner Intermediate Advanced

What are your primary fitness goals?

What days and times are you interested in participating?

Monday	AM	Noon	Evening
Tuesday	AM	Noon	Evening
Wednesday	AM	Noon	Evening
Thursday	AM	Noon	Evening
Friday	AM	Noon	Evening
Saturday	AM	Noon	Evening
Sunday	AM	Noon	Evening

Specific Days/Times:

Day: _____ **Time:** _____

Comments:
