



124 East 40th Street Suite 603
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KIDZ FIT Course Application

Mail your application to:

Smart Workout 124 East 40th Street, Room 603, New York, NY 10016 or
Fax to: 212 661 1880 Email to: Smartworkout@verizon.net

Contact Information (please print)

Name of Adult (First & Last): _____

Name of Child (First): _____ Age of Child: _____

Land Mailing Address: _____

E mail: _____

Phone: _____

Course Registration

Each session consists of 3 kid classes and 3 adult classes. A "registration" includes all 6 classes, and costs \$132.50*

**Smart Workout members and siblings receive a \$52.50 discount*

Make up policy: Up to two make ups per session permitted in the form of a cash credit against future registrations.

CHECK SECTION YOU ARE REGISTERING FOR:	PAYMENT METHOD
<input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Spring	<input type="checkbox"/> Enclosed check (Make payable to Smart Workout) <input type="checkbox"/> Credit Card Number _____ Expiration _____



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