

Stay in Shape The Fun Way



Calabogie Pilates

2026 Spring Registration Form

You Need To Bring

NAME: _____

PHONE: _____

EMAIL: _____

Beginner's Pilates: Exercise mat, yoga block, hand weights.
Pilates: Exercise mat, 2 lb hand weights, yoga block. Some classes may require resistance bands and exercise ball.
Back Fitness & Stretch: Exercise mat, yoga block and foam roller.

PAYMENT: Cash, eTransfer to susan.wnhc@gmail.com, or cheque payable to Susan Veale

NO CLASS: MONDAY APRIL 6th, WEDNESDAY, MAY 27th

**Save 10%
Pay by March 20th**

<input checked="" type="checkbox"/>	Course Programs	Date	Day	Time	Cost w/ HST	Early Registration
	Pilates Combo Level 10 Weeks	April 13 - June 15	Monday	5:00 - 6:00 pm 60 Min Class	\$169.50	\$152.55
	Pilates Level Two 10 Weeks	April 9 - April 30 May 6 - June 17	Thursday Wednesday	9:15 - 10:15 am 60 Min Class	\$169.50	\$152.55
	Pilates Level One 10 Weeks	April 9 - April 30 May 6 - June 17	Thursday Wednesday	10:30 - 11:30 am 60 Min Class	\$169.50	\$152.55
	Pilates Beginner 10 Weeks	April 13 - June 15	Monday	6:15 - 7:15 pm 60 Min Class	\$169.50	\$152.55
	Back Fitness / Stretch 10 Weeks	April 13 - June 15	Monday	3:45 - 4:45 pm 60 Min Class	\$169.50	\$152.55

Assumption of Risk and Release of Liability. This is a release of legal rights. Please read and understand before signing.

I, (print your name), _____, (henceforth known as the "Participant") freely choose to participate in the "Calabogie Pilates & More" programs offered by Wellness Natural Health Centre. I agree to release, indemnify, and defend the Wellness Natural Health Centre and any of its officials, officers, employees and agents from and against any claim which I, the participant, may have for any losses, damages or injuries arising out of or in connection with my participation in any Wellness Natural Health Centre Program. I indicate that by my signature below that I have carefully read this release clause and acknowledge that I understand it.

DATE: _____

SIGNATURE: _____

Wellness Natural Health Centre
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