



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

PEDAL WITH A PURPOSE

HARRISON FAMILY YMCA

SPIN@THON

Join us in our first Spin-a-thon to raise money for our 2017 Annual Campaign. This will be an amazing experience of fun rides and education about the impact we are making in many lives, because of volunteers and donors just like you!

SATURDAY, FEBRUARY 18TH 7AM-NOON

- 7:15-8:15: Early Morning Energy with Beth!
- 8:30-9:30: Funky Frenzy Fun with Haywood!
- 9:45-10:45: Get Glowing with Jessica!
- 11-12: Super Human Speed with Katy!

ONE HOUR IS ALL IT TAKES TO HELP MAKE IMPACT!
\$25/BIKE. BOOK YOUR BIKE ONLINE OR AT THE Y.

*Limited bikes per class. First come, first serve!

*Must register and book your bike by January 28th to get your t-shirt

REFRESHMENTS & RAFFLES FOR EACH CLASS!

\$25 gives

Youth a chance to experience a season of sports.

A senior access to stay active and make friends.

A military family access to a place that can be there for them during difficult times.

A child access to the afterschool program, keeping them safe and continuing to learn.

Spin-a-thon Fundraiser Registration Form

Participant's Name (First, Last) _____ Date of Birth _____

Address _____ City/Zip _____

Home Phone _____ Email _____

Emergency Contact Name (First, Last) _____ Phone Number _____

Please circle the class(es) below you wish to book a bike for:

*you may sign up for more than one class. It is \$25 per class, to benefit those who need us most.

*If you wish to have a shirt, you must register by January 28th.

*Must be age 15 or older.

7:15-8:15 Early Morning Energy with Beth

8:30-9:30 Funky Frenzy Fun with Haywood

9:45-10:45 Get Glowing with Jessica

11-12 Super Human Speed with Katy

If you wish to have a Spin-a-thon Tshirt, you must register by Jan. 28th.

Please circle your shirt size below:

Adult S

Adult M

Adult L

Adult XL

Adult 2X

Adult 3X

I understand and agree that neither the Harrison Family YMCA nor co-sponsoring organizations or their respective chapters, officers, directors, employees, agents, members or volunteers shall assume or have any responsibility or liability for expenses or medical treatment or form compensation for any injury may suffer during or resulting from my participation in this program. I do hereby, for myself, my heirs, executors and administrators, waive, release and forever discharge any and all rights and claims for damages that I may have or that may hereafter accrue to me arising out of or in any way connected with my participation in this program. I also represent and warrant that I have been advised to seek consultation from my doctor about whether I can safely participate in this program and whether there are precautions or limitations to my participation.

Participant's Signature _____ Date _____