

# WATER AEROBICS

Time: 11:15am - 12:00pm  
 Location: De Soto Aquatic Center  
 32907 W. 84th Street  
 De Soto, KS 66018  
 Class Size: Minimum - 8 participants  
 Maximum - 25 participants  
 Instructor: Ellen Johnson



**\*\*\* Please mark your calendar - Confirmations are not sent out. \*\*\***

**Choose Class or Classes you will be attending:**

_____ <b>June - Monday</b> Fee: \$14.00 June 4-25, 2018	_____ <b>July - Monday</b> Fee: \$14.00 July 9-30, 2018	_____ <b>August - Monday</b> Fee: \$7.00 August 6-13, 2018
_____ <b>June - Wednesday</b> Fee: \$14.00 June 6-27, 2018	_____ <b>July - Wednesday</b> Fee: \$11.00 July 11-25, 2018	_____ <b>August - Wednesday</b> Fee: \$11.00 August 1-15, 2018

**Release Statement:** The undersigned states that he/she understands that the City of De Soto and any subcontractors hired by the city (hereinafter "released parties") are not and shall not be responsible for or liable for any illness, or injury to person or damage to property resulting from the program in which the undersigned is enrolling or being enrolled or from his/her participating in said program, and the participant and the undersigned, if the participant is a minor or under other legal disability, hereby forever releases and holds harmless the released parties, their employees, agents and representatives from any and all claims of any kind that the participant, or the undersigned or their respective heirs, executors, administrators, or assigns may have or claim to have resulting from participation in said program. Also, the undersigned and the participant authorize the City Parks and Recreation to use at its discretion any photograph (s) (black/white or color) taken of the participant in the program and waive any and all claims that the participant or undersigned or their heirs, executors, administrators, or assigns may have or claim to have resulting from such photograph(s) or reproductions thereof. **I have read and understand the release statement: registration invalid without signature of adult.**

Participant's Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ Contact Phone #: \_\_\_\_\_  
 E-Mail Address: \_\_\_\_\_  
 Participant's Signature: \_\_\_\_\_

**Register Online:**

[www.desotoks.us/parks-and-recreation.html](http://www.desotoks.us/parks-and-recreation.html)  
 2018 - Water Aerobics - Summer

**Registration Drop Off or Mailing Information:**

32905 W. 84th Street - P.O. Box C - De Soto, KS 66018

**Questions:**

Justin Huslig - (913) 586-5281 - [jhuslig@desotoks.us](mailto:jhuslig@desotoks.us)