



Parks and Recreation Department  
1100 Chatham Av Norwalk, IA 50211 515.981.9206



## 2016 Water Aerobics

*PRE-REGISTRATION REQUIRED*

(Register online @ [www.norwalk.iowa.gov](http://www.norwalk.iowa.gov), Parks and Recreation office, or by mail)

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Our aquatic workout is performed in the cool and relaxing pool atmosphere. Each class consists of a 45-minute aerobic workout that includes muscle toning for arms, stomach, hips, and legs along with flexibility and relaxation exercises. This program stresses going at your own pace. All exercises can be performed either high or low impact. You decide how hard you want to work. Instructor:  
Mary Jane Sharp.

### Dates

**Registration Dates:** May 23 to Jun 3

**Program Dates:** June 7 through July 28

(rainout dates: Aug 2, 4)

**Program Times:** 8:30pm to 9:15pm

**Program Days:** Tuesday & Thursday

### Information

**Cost:** \$56.00 residents

\$64.40 non-resident

**Location:** Norwalk Aquatic Center



**Late Fee:** A late fee of \$15.00 will be assessed in addition to the regular fee for any registration taken after the Friday, Jun 3 deadline, pending there is room still available.

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TURN OVER TO FILL OUT REGISTRATION INFORMATION

# Norwalk Parks and Recreation Registration Form

## Individual Information:

Name:

Address:

City, State, Zip:     
Daytime Phone #:  Type:   
Evening Phone #:  Type:   
Cell Phone #:  Preference:   
Email Address

## Activity Information:

Program  Registration Fee  Late Fee

## Financial Assistance Program

This program is intended to open up participation opportunities for Norwalk area children by reducing financial obstacles for those who may not be participating because they cannot afford to pay the registration fees.

**Would you like to contribute \$1.00 (or more) to this program?** Yes \_\_\_\_\_ No Thank You  
*(if yes, please add your donation to the registration fee - and THANK YOU!)*

## Additional Comments/Medical conditions (if any):

## Liability Wavier:

I give permission for my child to participate in this program and agree not to hold the Parks and Recreation Department, their staff, or any volunteer helpers responsible for any accidents. I have READ and AGREE to the waiver:

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

FOR OFFICE USE ONLY: 440.4500

PAID \_\_\_\_\_ CK# \_\_\_\_\_ CASH \_\_\_\_\_ By: \_\_\_\_\_  
Credit Card \_\_\_\_\_ Number \_\_\_\_\_ Expires \_\_\_\_\_