

# Grey Nuns Rehab Outreach Services

... gentle exercise in a safe setting

## REGISTRATION FORM

Date \_\_\_\_\_

Mar 2008

Name \_\_\_\_\_ Gender (F / M) Date of Birth \_\_\_\_\_ Doctor \_\_\_\_\_  
Day/Month/Year

Address \_\_\_\_\_ Postal Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_ How did you hear of this program? \_\_\_\_\_

Are you:     Caritas Staff     Caritas Volunteer     CHA Staff     Member of the public

Please inform a staff member before writing your credit card no.

MasterCard, Visa or AMEX # \_\_\_\_\_ Expiry Date \_\_\_\_\_

Forward completed form  
with payment to:

Grey Nuns Rehab Outreach Services,  
c/o Rehabilitation Medicine  
Grey Nuns Community Hospital  
1100 Youville Drive West Edmonton, Alberta T6L 5X8

**REFUNDS** There are NO REFUNDS if you cancel within 24 hours of the start of the class or after it has begun. If you have surgery during the session, please contact the Outreach Coordinator to discuss options for class credit.

**MISSED CLASSES** If you are unable to make a class due to illness, specialist appointment, vacation, etc, you may send someone (a friend, neighbour, spouse) in your place. If we cancel a class, we will credit you or reschedule the class, otherwise there are NO MAKEUPS. If you have surgery or develop a prolonged illness during the session, please contact the Outreach staff at 735-7121 to discuss options.

**DUPLICATE RECEIPTS** There will be a \$10 charge for duplicate receipts.

*FOR ADMINISTRATIVE USE ONLY*

*PROGRAM INFORMATION REQUEST* \_\_\_\_\_

*Sent:* \_\_\_\_\_

Water Wellness / Works    Start date \_\_\_\_\_

Days & times \_\_\_\_\_

Tai Chi Chih    Start date \_\_\_\_\_

Yoga    Start date \_\_\_\_\_

FIT Program    Start date \_\_\_\_\_

Walking to Wellness    Start date \_\_\_\_\_

Get Up & Go    Start date \_\_\_\_\_

Gentle Dance Moves    Start date \_\_\_\_\_

Pool Relaxation    Start date \_\_\_\_\_

Massage    First appt \_\_\_\_\_

Enquiry & Registration Line for Exercise Programs.... 735-7121

for Massage Therapy.....735-7165

