



Our Commitment:

We believe that YMCA programs should be available to everyone who wants to participate.

Through the generosity of YMCA friends, we provide scholarships for those who need financial assistance.

Mission Statement:

To put Christian principles into practice through programs that build healthy spirit, mind and body for all.

DeVos-Blum Family YMCA
of Boynton Beach
9600 Military Trail
Boynton Beach, FL 33436
561-738-9622

HEALTH & WELLNESS

We build strong kids, strong families, and strong communities.

**Capoeira
For Kids
2008
Ages 5-12**



For more information contact:

Joanna Craver-(561) 536-1428
Jcraver@ymcaspbc.org

Wednesdays

Aerobics Room
4:30-5:30 PM

Saturdays

Multipurpose Room
11:00 AM—12:00 PM

One Class Per Week

Members: \$25/Month

Youth Members: \$30/Month

Non-Members: \$35/Month

Two Classes Per Week

Members: \$45/Month

Youth Members: \$55/Month

Non-Members: \$65/Month

Registration/Refund Policy

- Capoeira classes may be cancelled if there are less than (10) ten enrolled in a class.
- No refunds or make-ups are given for missed classes.
- Credits may be issued for medical reasons only, with doctors note in the 1st week of a session.

Registration Form

Participant Name:

DOB: _____

Address:

Zip Code:

Phone:

() _____

Alt. Phone:

() _____

E-Mail Address:

It's a Martial Art! It's a Dance! It's totally Brazilian. It relieves stress, builds strength, coordination and self-confidence.

Registration Policy

I understand that the YMCA of South Palm Beach County, Inc. assumes no responsibility for injuries or illness which I may sustain as a result of my physical condition, or from my participation in any athletic activity, sport program, use of equipment, exercise or other activities. I expressly acknowledge, on behalf of myself and my heirs, that I will assume the risk for any and all injuries and illness that may result from participation in these activities. I hereby release the YMCA of South Palm Beach County, Inc., its agents, servants, and employees from any and all claims of injury, illness, death, loss or damage which I may suffer as a result of my participation in these activities. I understand that the YMCA of South Palm Beach County, Inc. is not responsible for personal property, lost or stolen, while members and/or program participants are on the premises.

Signature of Parent/Guardian

Date

Print Name of Participant

Guardian signature required for children under 18 years of age