



SPOTSYLVANIA PARKS AND RECREATION DEPARTMENT
P.O. BOX 28 • SPOTSYLVANIA, VA 22553 • 507-PLAY (7529)
www.spotsylvania.va.us/parkandrec



Tai Chi & QiGONG Mon/Wed

(Adults & Teens 16 & Older) (Ages 12 -15 w/parent)

Activity # 222901-11

TAI CHI is the wonderful Chinese art of balance. Through Tai Chi we work the energy of the body to reduce stress, depression, blood pressure, and our heart rate while improving our breathing, flexibility, mobility, balance, strength, circulation, posture, concentration, memory, and mental outlook.

QIGONG are postures and movements which enhance the functioning of our joints, our immune system, and all the main systems of our bodies for vitality and longevity.

Tai Chi & QiGong are done slowly and smoothly without the jumping and jarring impact of other exercise. *Tai Chi & QiGong do not include any exercises which require getting down on the floor.*

WHAT TO WEAR? Loose fitting clothes that allow a full range of movement and comfortable shoes that provide stability.

Marti Wilson, Certified Tai Chi Instructor

WHEN: Monday/Wednesday Evenings from 6:15pm - 7:15pm. To allow for those whose schedules may run them a bit late or have the need to depart early. QiGong will be taught at the beginning and end of each class with TaiChi during the main part of class.

CLASS DATES: November 4 – 27, 2019

All classes will meet on Monday/Wednesday evenings, 6:15 p.m. – 7:15 p.m. at Salem Elementary School. (4501 Jackson Road, Fredericksburg, Va. 22407)

FEE:

\$40 per Spotsylvania County resident/ \$50 non - county resident. Make checks payable to: **"Treasurer, Spotsylvania County."**

REGISTRATION BEGINS: October 7, 2019 **REGISTRATION ENDS: October 25, 2019**

Complete the registration form and return it, along with the fee, to the Parks and Recreation Department. **NO Walk-ins Allowed.** There is a **minimum of 3 students** needed to conduct the class and **20 students maximum**. Class is open on a first come, first serve basis or until full. Make checks payable to: **"Treasurer, Spotsylvania County"**. **\$50 fee will be charged on all returned checks. \$10 charged on all late registrations. 2.95 % NON-REFUNDABLE CONVENIENCE FEE CHARGED ON ALL CREDIT/DEBIT CARD TRANSACTIONS.** Birth certificate is required at time of registration if not already on file.

To Register online: A Household waiver must be completed and on file at the Parks and Recreation office prior to registering online. Visit www.spotsylvania.va.us/parksandrec for online registration.

WITHDRAWALS

Those wishing to withdraw from the class must do so by contacting the Spotsylvania Parks and Recreation Department one week prior to the posted deadline of the program. A 20% administrative fee will be charged on all refunds. Individuals should follow up their verbal cancellation request with a written refund request. Failure to attend class does not constitute a proper withdrawal and the participant will not receive a refund.

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Leisure Activity / Class Registration Form

Please Print Legible – (

First _____ MI _____ Last _____ Boy _____ Girl _____

Complete Address _____

City _____ Zip _____

Is this a new address or phone number? _____ Email Address: _____

Home Phone _____ Parent's Work Phone _____ Cell Phone _____

Age (where Applicable) _____ Birth date _____

Birth certificate is (circle one): on file enclosed (A birth certificate must accompany this form if not already on file.)

Shirt Size (circle): Youth Small (6-8) Youth Medium (10-12) Youth Large (14-16)
(If Applicable) Adult Small (34-36) Adult Medium (38-40) Adult Large (42-44) Adult Xlarge (46-48)

Medical conditions, injuries, or allergies _____

Emergency Contact: _____ Phone _____

Class/Activity Name _____

Class / Activity Date(s) _____ **Activity Number** _____

Fee: \$ _____ (Add \$10.00 if registering after the deadline date stated on front page of form.)
(\$50 Fee On All Returned Checks)

Release of Claims: (Parent or Guardian must sign for those under age 18): **I, the undersigned, do agree to indemnify and hold harmless Spotsylvania County, and the officers, employees and agents thereof, and Spotsylvania County School authorities, from any and all claims or liability, including attorney's fees and costs for any personal injury or other damage suffered as a result of participating in a program.** I understand that if I withdraw from the class/program, I must do so by contacting the Spotsylvania Parks and Recreation Department by the registration deadline date stated on the front page of this form. I must follow up my verbal cancellation request with a written refund request. A 20% administrative fee will be charged on all refunds. I understand that if I withdraw from the program for any reason after the registration deadline, no refund will be available. Failure to attend a class/program does not constitute a proper withdrawal, and the participant will not receive a refund.

Parent/Guardian Signature _____ **Date:** _____

Print Name _____

Checks Payable to "Treasurer, Spotsylvania County." (\$50.00 Fee On All Returned Checks)