

Sawtooth Fitness Registration Form

Monday, Wednesday Level I

Tuesday, Thursday Level II

10:00 am – 1:00 pm

\$300 for 6 weeks once per week

\$450 for 6 weeks twice per week

Along with the exercise excursions, you will also receive:

- Fitness Program Consultation
- Nutrition Plan Advice
- Healthy cooking guidance
- Unlimited Support

Name: _____ Phone: _____

Address: _____

City, State, Zip: _____

Email: _____

Each Group is Limited.

*Please make checks payable to “Sawtooth Fitness LLC”.

We also Accept PayPal (see Web Site to use)

Amount: \$ _____ Check #: _____

Signature: _____ Date: _____

Email Registration: THINK@sawtoothfitness.com