

Beast Masters
Strength Training & Fun Conditioning



Beast Masters Strength Training & Fun Conditioning Program is in its 7th Year! We believe in teaching technique to ensure safety and proper form. Beast Masters will learn how to warmup and stretch, how to run properly, how to jump safely and effectively, how to create leverage by pushing sleds and throwing medicine balls, and lastly Beast Masters will improve their cardiovascular fitness by competing in FUN CONDITIONING GAMES like, but not limited to; dodge ball, tag variation games, relay games, etc. Whether your Beast Master is a beast athlete of just a monster beast in general... this class is sure to burn off all that extra energy!



Beast Masters Schedule:

Every Tuesday & Thursday

4:30pm to 5:15pm

Ages: 3 to 9

Price Options

\$10 Drop-in

\$40/month unlimited membership

Registration Form

Beast Master's Name _____

Parent's Name _____

Parent Cell: _____ Parent Email: _____

Age _____ Grade _____

Address _____

City _____ State _____ Zip Code _____

Release of Liability

I/we realize that participation in fitness classes and physical activities could involve some possible personal injury. Despite precautions, accidents and injuries may occur. By signing this release form, I/we (the athlete and parent/guardian) assume all risks related to the use of any and all spaces used by Cape May Fitness (CMFC) and Cape May Dance Company (CMDC) I/we agree to release and hold harmless CMFC/CMDC, including its teachers, athletes, staff members, and facilities used by both entities from any cause of action, claims, or demands now and in the future. I/we will not hold CMFC/CMDC liable for any personal injury or any personal property damage, which may occur on the premises before, during or after classes. Furthermore, I/we agree to obey the class and facility rules and take full responsibility for my/our behavior in addition to any damage I/we may cause to the facilities utilized by CMFC/CMDC.

I understand that CMFC/CMDC are licensed, accredited and insured organizations. In the event that I/we should observe any unsafe conduct or conditions before, during or after my/our classes, I/we agree to report the unsafe conduct or conditions to the Owner, Executive Director, Artistic Director, instructor or staff member as soon as possible.

Athlete's Name: _____
(Print)

Age: _____

Athlete's Signature: _____
(If unable to sign, parent/guardian sign only)

Date: _____

Parent/Guardian Name: _____
(Print)

Phone: _____

Parent/Guardian Signature: _____

Date: _____