



Registration of Intention to participate in NuStart Health and Fitness Boot Camp

Name: _____

Address: _____

Post Code: _____

Home Phone: _____

Mobile: _____

Email: _____

How did you hear about us? _____

I wish to register my intention to participate in the following Boot Camp:

Commencing: _____ To view our classes, please visit: <http://www.nustart.com.au/bootcamp>

Time slot preferred: _____

Class: Open Ladies Teenagers

I understand that I will be placed on the Intention to Participate List for my chosen Boot Camp. I am happy for NuStart Health & Fitness to contact me by phone or email regarding Boot Camp acceptance, Special offers and Social events.

I understand I may be contacted up to 2 weeks prior my chosen Boot Camp to be offered a position in my chosen 6 week session. At which time I will be given 3 days to pay in full the cost of the Boot Camp before my position is offered to another person.

I understand that any personal information that I give to Numi Health will remain private and confidential, as stated in the Privacy Act 1988.

Sign: _____

Date: _____

Office Use:

Date Received: _____

Entered into Database: _____

Entered By: _____

Email sent: _____