

# Grimes Parks & Recreation Department

Telephone: (515) 986-2143

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[www.grimesiowa.gov](http://www.grimesiowa.gov)

CITY OF  
**GRIMES**



## 2009 Fall ZUMBA® Fitness Class

### Program Description:

Zumba® is a Latin-inspired dance-fitness class that incorporates Latin and International music and dance movements creating a fun and effective cardio workout. It is an all-over-body workout with emphasis on the gluts, legs, arms, abdominals, and the most important muscle of the body...THE HEART! This 6-week class format combines fast and slow rhythms that tone and sculpt the body. Classes are 60 minutes long; 45 minutes of cardio and 15 minutes of core work and stretching. No prior experience necessary. Bring a mat, towel and water! Wear comfortable clothes and sneakers. Pre-registration is required!

**Who:** For Ages 16 and Up

**Where:** Grimes Community Complex Gym

**Day:** Mondays, September 14 – October 19

**Time:** 5:30-6:30pm

**Instructor:** Ildiko Kadar, Zumba® Certified Instructor



**Questions:** Contact Brett Barber, Grimes Parks & Recreation Director, by calling 515-986-2143 at [bbarber@ci.grimes.ia.us](mailto:bbarber@ci.grimes.ia.us).

**Registration:** Register online at [www.grimesiowa.gov](http://www.grimesiowa.gov) or by stopping into the GCC. You can also mail in registrations to Grimes City Hall at 101 N. Harvey St. in Grimes, IA 50111.

**Cost:** \$45.00 per 6-week session

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### 2009 Fall “Zumba® Fitness” Class Registration Form

PARTICIPANT'S NAME: \_\_\_\_\_ DOB \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

Cost is \$45.00 per 6-week session

#### Release and Indemnification Agreement:

I hereby request that you accept my application for registration in this Grimes Park and Recreation Department program. With consideration of your acceptance, I hereby release the City of Grimes, its employees, associated with this program from all claims which may arise in the event I am injured in an accident that occurs while I am participating in this program. I further agree to indemnify the City of Grimes, its employees, associated with this program for any claim, which may hereafter be presented on behalf of myself as a result of any such injuries. I hereby acknowledge that it is my responsibility, not the responsibility of the City of Grimes, to provide medical insurance coverage in the event I desire to have medical insurance coverage while I participate in this particular activity. I will also allow pictures of myself during this program to be used only for the marketing purposes of future Grimes Parks and Recreation programs.

Signature

Date

**Grimes Parks and Recreation Office ~ 410 S. Main St. in Grimes**