



Healthy Aging Association Presents the 13th Annual

Age with Movement Celebration



Celebrate Older Americans month by enjoying a morning of movement and feeling Young at Heart

Friday, May 3, 2019 | 8:00 a.m. – 12:00 p.m.

East La Loma Park - 2001 Edgebrook Drive, Modesto



All proceeds will benefit Healthy Aging Association

Free Event

Fitness Fun | 50+ Community Booths

Additional Parking located at the Church of Latter Day Saints

on the corner of El Vista and Edgebrook.

Opportunity Drawing

Over 70 prizes to give away!

You do not need to be present to win.

**\$1.00 Each or 6 for \$5.00
or 15 for \$10.00**

For more event information, please contact (209)525-4670 | HealthyAgingAssociation.org

2019 AWM Registration Form

Please Pre-Register before April 15th to reserve your t-shirt size

I am registering as Individual or Team

NAME: _____ TEAM NAME: _____

ADDRESS: _____ CITY/STATE: _____ ZIP: _____

PHONE NUMBER: _____ EMAIL: _____

Free Activities Include:

Select all events that you are interested in: Aerobics Walking Line Dancing Tai Chi

*Add on Options

Registration is Free, however we have a few add on options available.

* **\$15.00** = Yes, I would like a t-shirt, event bag and access into BINGO. T-Shirts Size _____

* **\$10.00** = Pet Parade (yes, I want to enter my dog into the pet parade).

* **Donation** = _____

WAIVER (Signature Required for Participation)

In consideration of the acceptance of my entry, I, for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I have or may have against the organizers of this event, its principals, its employees, all sponsors and their representatives and any and all claims of damages, demands, actions whatsoever in any manner, as a result of my participation in the Age with Movement event, including travel to and from this event. I attest and verify that I am physically fit and have sufficiently trained for the completion of the event and I have not been advised otherwise by a qualified medical person. Further, I hereby grant full permission to any and all of the foregoing to use my name and likeness in any broadcast, telecast, video or print media of the event without compensation to me.

Signature: _____ Date: _____

HAA Use Only: AMOUNT PAID: _____ RECEIVED BY: _____

Help Us Raise Funds to Support Our Young at Heart Fitness Classes

Use this form to keep track of the donations you raise! Donations can be made online at
www.healthyagingassociation.org.

Please make checks payable to Healthy Aging Association

Registered Walkers Name: _____

DONOR'S NAME	CHECK/ CASH	ONLINE/ CREDIT CARD
<i>Example:</i> ACTIVE ANDY	Check - \$20.00	
1.		
2.		
3.		
4.		
5.		
6.		
7.		
TOTAL \$		



For Event Information Please Contact

Healthy Aging Association

Phone: (209)525-4670

Email: healthy.aging2000@gmail.com

Or visit our website www.healthyagingassociation.org

Please mail your registration form to: Healthy Aging Association
3500 Coffee Road, Suite 19 | Modesto, CA 95355