

Epic Healthy Living Education Center

爱培健康生活教育中心

135 W Church Street, Room E, Libertyville, IL 60048

www.epichealthyliving.org

Epic 2016 Spring Class Schedule and Tuition:

Jan 7th - May 20th (20 weeks of class)

Time	Class	Semester	Day
Thu 7:15-8:15 pm	Yoga	\$200	\$12.5
Thu 8:30-10:30pm	Painting	\$320	\$20
Fri 6-7 pm	Healthy Living	\$200	\$12.5
Fri 7-8 pm	Tai-Chi	\$200	\$12.5
Fri 6:30-8:30 pm	Painting	\$320	\$20
Fri 8:30-10:30 pm	Painting	\$320	\$20
Fri 8-10 pm (1 st Fri)	Line Dance	Free	
Fri 8-10 pm (2 nd Fri)	Chorus	Free	
Fri 8-11 pm (3 rd Fri)	Photography	Free	
Fri 8-11 pm (4 th Fri)	Games	Free	

Students who enroll by semester enjoy a 20% discount in tuition. In addition, students who register two classes every semester get to attend the third class for free. The third class can be any class except Healthy Living class. Person with annual family income less than 16K could take our classes for free except Healthy Living class.

Registration Form

Name: (first) _____ (last) _____ M _____ F _____

Address: _____ City: _____ Zip: _____

Home phone: _____ Cell phone _____

Email address: _____

Student Waiver

I acknowledge that there are certain risks of injury, damage or loss associated with participation of programs offered at Epic Healthy Living Education Center. I further understand that Epic Healthy Living Education Center does not offer medical insurance for injuries sustained from attending those programs. I agree to assume the full risk of any injury, loss or damages regardless of severity, which I, or my child, may sustain as result of participate in programs offered at Epic Healthy Living Education Center. I agree to waive and relinquish all claims, demands, damages, right of action, or causes of action, present or future, whether known or unknown, anticipated or unanticipated, I may have, or my child, may have, associated with attending the programs. I do hereby agree to fully release, discharge, indemnify and hold harmless the Epic Healthy Living Education Center and its officers, agents, servants, employees and volunteers from any and all claims, demands, damages, rights of action, or cause of action, present or future, whether the same is known or unknown, anticipated or unanticipated, I may have, or my child, may have resulting from, associated with and/or arising out of attending and /or participating in the programs, including but not limited to me or my child using Epic Healthy Living Education Center facility and equipment.

Signature _____ Date _____