



FOR YOUTH DEVELOPMENT®  
**FOR HEALTHY LIVING**  
 FOR SOCIAL RESPONSIBILITY

# Y Living Interest Form

The YMCA is offering a 12 week program aimed at guiding you and your family to a healthier and active lifestyle. Please complete this form and return it to the YMCA. The Y will contact you prior to the program start date. All families that turn in a form will go through this process before being registered for the program. Space is limited to 35-40 individuals per location.

1. Your Name: \_\_\_\_\_ Date: \_\_\_\_\_
2. Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_
3. Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_
4. Best time to contact you (Please circle one): Morning\_\_\_\_ Afternoon\_\_\_\_ Evening\_\_\_\_
5. What is your preferred language? English \_\_\_\_\_ Spanish \_\_\_\_\_
6. Email address: \_\_\_\_\_
7. List the names, gender, and ages of all adults and children living in your household  
 (List yourself on the first line):

First Name	Last Name	Gender (circle one)	Age
		Male Female	
		Male Female	
		Male Female	
		Male Female	
		Male Female	
		Male Female	

8. Which YMCA facilities are closest to you: \_\_\_\_\_
9. Are you able to attend evening classes twice a week for 12 weeks? Yes\_\_ No\_\_
10. Are there any evenings you are **NOT** able to attend? \_\_\_\_\_
11. What type of physical activity does your family currently do? \_\_\_\_\_  
 \_\_\_\_\_
12. Why do you think you and your family would benefit from this program? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Please return the completed form to the YMCA that is closest to you,  
 or you can fax the form to the Y Living Center at (210)921-0276.