The StrongPeople Strong Bodies Program
An evidence-based progressive strength training program

STRONG People™
STRONG BODIES

The StrongPeople Strong Bodies program is an evidence-based progressive strength training program. The ***Strong Bodies Program*** will help you increase your strength, bone density, balance, and energy, and you will look and feel better!

Your Strong Bodies Classes Will Meet:

_____	**Gilman**	(Mon/Thurs) 9:00 a.m. (Community Center)
_____	**Goodrich**	(Mon/Wed) 9:00 a.m. (Town Hall)
_____	**Medford**	(Mon/Wed) 8:30 a.m. (Multi-purpose/Fairgrounds)
_____	**Medford**	(Mon/Wed) 4:00 p.m. (Multi-purpose/Fairgrounds)
_____	**REC Center**	(Tues/Thurs) 8:00 a.m.
_____	**Rib Lake**	(Tues/Thurs) 8:00 a.m. (Senior Site)
_____	**Online**	(Mon/Wed) 8:00 a.m. (via Zoom)

Session(s):

_____Winter Session _____Spring Session

Payment: $20/seasonal session or $10 online for the year
Make checks payable to:
Extension Taylor County

Or mail form and payment to:
Extension Taylor County
925 Donald Street, Room 103
Medford, WI 54451

***All* Strong Bodies Program Participants Should Wear:**

- Comfortable, loose, breathable clothing
- Closed-toe shoes with rubber soles, preferably athletic shoes

For Each Class, Strong Bodies Program Participants Should Bring:

- At least one full water bottle
- Exercise mat or towel

Weather Policy:
If schools are closed, classes will be cancelled.

Refund Policy:
No fees will be refunded unless you submit a statement from a physician that you can no longer continue this class.

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Participant Summary Information Sheet

Name _____

Address _____

_____

County _____

Phone Number _____

Email _____

Age: ___ 18-24 ___25-44 ___45-64 ___65-74 ___75+ ___I prefer not to respond

Race: Select all that apply.
___ Alaska Native, American Indian, Indigenous, or Native American
___ Asian
___ Black or African American
___ Native Hawaiian or Other Pacific Islander
___ White
___ One or more races that are not listed above
___ I prefer not to respond

Ethnicity: Check one that applies
___ I identify as Chicano/Chicana/Chicanx, Hispanic, or Latino/Latina/Latinx
___ I do not identify as Chicano/Chicana/Chicanx, Hispanic, or Latino/Latina/Latinx
___ I prefer not to respond

Gender: Check one that applies
___ Female
___ Male
___ Non-Binary
___ I prefer not to respond

In Case of Emergency, please call:
Name: _____
Relationship: _____
Phone Number(s): _____

The Wisconsin Strong Bodies Program is based on the evidence-based StrongPeople Strong Bodies Program, and is offered to Wisconsin residents as a collaboration between UW-Madison Extension and StrongPeople.

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Physical Activity Safety

Please mark answers honestly to the following questions. (This form is for participant use only and should not be collected by the Strong Bodies leader).

1. Do you have Medical Condition such as heart disease, high blood pressure, diabetes, cancer, joint/bone problem, respiratory disease, or any other medical condition that could be made worse by becoming more physically active?	Yes	No
2. Do you currently Experience: chest discomfort with exertion, unreasonable breathlessness, dizziness, fainting, blackouts, ankle swelling, unpleasant awareness of a forceful, rapid, or irregular heart rate, burning or cramping sensations in lower legs when walking short distances, or known heart murmur		
3. Has your doctor ever said that you should only do medically supervised physical activity or have any other reason that you should not do physical activity?		

Please list any medical concerns you would like your instructor to know about (heart concerns, problems, or pain with joints, etc.):

I have read, understood, and completed this questionnaire. Any questions I had were answered to my full satisfaction.

If you answered "YES" to one or more questions:

If you marked 'Yes' to any of the above statements, you should seek further information from your medical professional before becoming more physically active or engaging in a fitness appraisal.

If you answered NO to all of the questions above:

Begin slowly and build up gradually. This is the safest and easiest way to go.

- Delay becoming much more active if:
- You are not feeling well because of a temporary illness such as a cold or a fever. Wait until you feel better.
- You are or may be pregnant. Talk to your doctor before you start becoming more active.

If your health changes so that you would answer YES to any of the above questions tell your fitness or health professional. Ask whether you should change your physical activity.

In the event of a medical emergency, 911 will be called.

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Participation Agreement

I desire to participate voluntarily in education activities with the University of Wisconsin-Madison Division of Extension. I understand that I am being asked to read each of the following paragraphs carefully. I know, understand, and appreciate the risks that are inherent in the Strong Bodies programs and activities. I hereby assert that my participation is voluntary and that I knowingly assume all such risks. I understand that if I have questions about any of the terms contained in this agreement, I may contact the UW-Madison Division of Extension Strong Bodies program (strongbodies@extension.wisc.edu

Demographics

Understanding the demographics of our participants helps us improve Extension programs and services. Asking for the following information also helps us meet our institutional requirements for compliance with Federal non-discrimination policies. Providing us with this information is voluntary. You are not required to fill out this form to participate in Extension programs. If you have any questions about this form or why Extension collects this information, please contact: Kim Waldman, Compliance Coordinator & Equity Strategist, UW-Madison Division of Extension, (608)263-2776, kim.waldman@wisc.edu.

Assumption of Risks: StrongPeople National Program

I understand that physical activity related to the Strong Bodies Program, by its very nature, carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. Some of these involve strenuous exertions of strength using various muscle groups, some involve quick movement involving speed and change of direction, and others involve sustained physical activity, which places stress on the cardiovascular system. The specific risks vary from one activity to another, but in each activity the risks range from: 1) minor injuries such as scratches, bruises, and sprains to 2) major injuries such as fractures, internal injuries, joint or back injuries, heart attacks, and concussions to 3) catastrophic injuries including paralysis and death. I understand that the University has advised me to seek the advice of my physician before participating in this activity. I understand that I have been advised to have health and accident insurance in effect and that no such coverage is provided for me by the University or the State of Wisconsin. I know, understand, and appreciate the risks that are inherent in the above-listed programs and activities. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.

_____ _____ _____

Participant Signature Date Participant Name (Please print legibly)

Video and Photo Consent for Use:

I recognize and acknowledge that the University of Wisconsin may record my participation and appearance on any recorded medium including, but not limited to video, audio, photos (collectively, "recordings") for use in any form (including, but not limited to print, websites, blogs, internet, and social media). I authorize such recording and release the University of Wisconsin to use my name, likeness, voice, and biographical material to exhibit or distribute such recordings in whole or in part without restrictions or limitations for any educational or promotional purpose.

_____ _____ _____

Participant Signature Date Participant Name (Please print legibly)

REC'D DATE _____

☐ CHECK # _____

☐ CASH _____

AMOUNT _____

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