



Personal Enrollment Form

Goal: 30 minutes of exercise 3 times a week

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

*Join Get Healthy DeSoto and get our weekly informative newsletter delivered to your inbox  
Check with your physician before starting any exercise program.*

Mail to: Get Healthy DeSoto  
Attn: Melissa McAlpine  
1002 Rock Rd.  
DeSoto, MO 63020



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