



THE PHILADELPHIA PUBLIC SCHOOL RETIRED
EMPLOYEES ASSOCIATION
440 N. Broad Street
Philadelphia, PA 19130
215-400-8750

**PPSREA FITNESS PROGRAM APPLICATION
FOR THE YEAR 2017 – STIPEND \$60.00**
Please Print and Complete All Information

NAME: _____ LIFE MEMBER # _____
(FIRST) (LAST)

ADDRESS: STREET _____

CITY _____ STATE _____ ZIP _____ TEL.#() _____

FITNESS FACILITY WHERE YOU ARE ENROLLED* _____

TELE.# () _____ DO YOU ATTEND TWO OR MORE TIMES PER WEEK: YES or NO **or**
DO YOU EXERCISE WITH A PERSONAL TRAINER: YES or NO

EMAIL _____

AMOUNT YOU PAY AND FOR WHAT LENGTH OF TIME _____

YOU MUST ATTACH TO THIS APPLICATION A COPY OF YOUR PAID RECEIPT SHOWING AT LEAST THREE MONTHS OF PAID MEMBERSHIP IN 2017. PLEASE PRINT YOUR NAME ON THE RECEIPT.

PLEASE HAVE AN INSTRUCTOR OR ADMINISTRATOR FROM THE FITNESS FACILITY SIGN BELOW

I CERTIFY THAT _____ IS PARTICIPATING IN A FITNESS PROGRAM AT THIS FACILITY FOR AT LEAST THE LAST THREE MONTHS

(FITNESS PROGRAM OFFICIAL)

(TITLE)

(DATE)

(PARTICIPANT'S SIGNATURE)

(DATE)

**PLEASE NOTE: MAIL THIS APPLICATION ALONG WITH YOUR PAID MEMBERSHIP RECEIPT TO:
FITNESS PROGRAM C/O STEVE KORSIN, 9733 CHAPEL RD. PHILADELPHIA PA 19115**

APPLICATIONS MUST BE RETURNED BY January 15, 2018 TO BE ELIGIBLE FOR THE 2017 STIPEND.

#If you do not know your Life Membership Number leave the space blank and we will look it up.

**If your membership is paid by another program such as Silver Sneakers, you are not eligible for the stipend.*

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