

Unleash Your Inner Strength!

Please complete the form below to have an ASPIRE Wellness team member contact you about your interests.

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

How did you hear about ASPIRE Wellness: _____

We have classes and activities to correspond with each Wellness dimension.
To learn more about a specific dimension, check the box beside it.

-  **ACTIVE**
Examples: Aerobics, Cardio, Strength Machines, Tai Chi, Nutrition
-  **SPIRITUAL**
Examples: Bible Studies, Prayer Group, Yoga, Various Support Groups
-  **PURPOSEFUL**
Examples: Volunteer Opportunities, Mat Ministry, Busy Hands

-  **INTELLECTUAL**
Examples: Trips, Educational classes, Speaker Series, Bridge
-  **RELATIONAL**
Examples: Wine & Cheese, Social Events, Summer Concert Series, Golf Outing
-  **EXPRESSIVE**
Examples: Art, Music, Quilting, Mixed Media, Poetry, Theatre

When complete, please send to:

ASPIRE Wellness Program Director
105 Burgess Drive, Zelienople, PA 16063
EMAIL: aspire@lutheranseniorlife.org
FAX: 724-452-3530