

FOREST ROW GYM/ WARRIOR ARTS & FITNESS ENROLMENT & CONSENT FORM



FOREST ROW GYM



Please read, complete and sign the below and the attached standing order form.

Please return to your instructor with your first month's payment via cash or cheque (payable to **Warrior Arts & Fitness**).

PERSONAL DETAILS:

Date of Joining:

Name/s:

DOB:

Home address:

.....

Mobile/ Home Phone number:

Email address:

How did you hear about us?.....

Please turn over 

Informed Consent for Taking Part In Physical Activity

Warrior Arts & All Fitness Classes:

I (name) _____ understand that my participation in exercise programmes, classes or events and any related activity conducted by Matthew Tucker and/or Warrior Arts and Fitness Personal Trainers, is voluntary and at my own risk.

I am aware that exercise can be physically stressful and, in certain instances, can even result in injury or cause death.

The levels of exercise that I will perform will be at my own pace, based upon my cardio-respiratory (heart & lung) fitness, muscular strength and endurance.

I hereby state that I will inform the trainer of any symptoms (e.g. fatigue, shortness of breath, chest discomfort, any pain/discomfort/concern for my safety/benefit) during my participation in exercise. If I have high blood pressure, diabetes, a heart condition, an existing injury, recent surgery or if I am taking any prescribed medications that could affect my performance, I will inform the trainer prior to participating in any exercise.

I understand that I will be given instructions and an induction on how to perform an exercise and use equipment and I will ask the trainer any questions if I do not understand.

Matthew Tucker and/or Warrior Arts and Fitness Personal Trainers will not be liable for any injuries or damage arising out of participation or use of facilities to the undersigned. It is agreed that Matthew Tucker and/or Warrior Arts and Fitness Personal Trainers, shall not be responsible or liable to the undersigned for articles lost or stolen whilst making use of the facilities.

I acknowledge that I have read this document in its entirety and understand the above. I have had the opportunity to ask questions and receive answers.

Gym and Personal Training:

The purpose of an exercise programme is to help you to achieve health and fitness goals. Your programme will be based upon your present activity/exercise levels and the goals that you wish to achieve. You will experience some feelings of exertion during each activity session and will become hot and uncomfortable at times. Your breathing and heart rate will increase as a result of these activities as would be expected from physical exercise of this type. As your fitness improves, you will participate in more vigorous levels of activity, if this is part of your goal, but these should remain within your capabilities. All activities will be explained and demonstrated to you but please feel free to ask questions about anything you wish.

Any exercise programme carries with it an element of risk. Your sessions are designed to minimise the risks whilst providing an effective exercise/activity programme. Please inform your trainer if, for any reason (such as illness or injury which might be aggravated by exercise, or eating certain foods), you should not participate in an activity.

During your sessions with your trainer present you will be closely supervised. During your sessions where your trainer is not present you will be responsible for your own safety. If, at any time, you feel undue pain or excessive discomfort stop the activity and inform your trainer of your symptoms.

You are free to withdraw from any activity at any time you wish.

I have read, understood and completed the **PAR-Q**. All questions have been answered to the best of my knowledge. I agree to take part in the programme described to me by my trainer. The nature, purpose, risks and benefits have been explained to me and I understand what is required of me and that I may withdraw at any time.

Payment and Cancellation Policy

Payments must be made in advance and 24 hour notice of cancellation for a class or PT session is required otherwise full payment will be incurred.

Should you wish to cancel your monthly membership **one month's** calendar notices is required.

Health Commitment Statement (HCS)

The Health Commitment Statement sets the standards that health and fitness centres and users can reasonably expect from each other with regard to the health of the user.

Background:

The HCS is the evolution of the PAR-Q, which has existed for the past 15 years. The HCS reflects government policy and legal trends, which aim to shift responsibility for personal health from the operator to the user. The Fitness Industry Association is taking the lead in allowing operators to be more accessible while facilitating a better working relationship between fitness and medical sectors in the community. This has also provided an opportunity to align the HCS to the skills and expertise of fitness professionals established through REPs.

The HCS has been developed by Fitness Industry operators, medico-legal professionals and health providers to support the evolving requirements of users and operators.

Purpose:

- Develop the current PAR-Q to simplify access to activity facilities for users
- Assist the Health, Medical and Fitness industries to work in harmony while supporting initiatives to encourage the nation to become more active
- Bring health and fitness clubs in line with virtually all other sports and active leisure in relation to health matters
- Demonstrate respect for members by placing responsibility where it belongs, with the individual member
- Be consistent with current Government policies in encouraging every individual to take responsibility for his or her own health
- Offer the opportunity to clubs to maximise their membership
- Be in keeping with current trends in legislation and case law
- Be consistent with a more modern approach to individual responsibility in medicine and the law
- Provide the opportunity for a uniform approach across the health and fitness industry, producing greater clarity and reducing costs
- Offer a simple solution in plain English, which is accessible to fitness instructors, staff and members
- Remove stress and anxiety from staff in relation to health of members

I have read and accepted all Terms & Conditions and the payment and cancellation policy.

Participant's Name (Please Print):.....

Participant's Signature: Date:

In case of emergency, contact:Phone:

(Parent's signature if under 18 years of age)

Signed:..... Dated:.....