

# QUEENSCLIFF SURF LIFE SAVING CLUB GYM MEMBERSHIP

## CUSTOMER INFORMATION:

First Name:	Surname:
Home Number:	Mobile:
Work Number:	Email:
Address:	Suburb:
Postcode:	
Gender:      Male <input type="checkbox"/> Female <input type="checkbox"/>	Date of Birth:
Club Membership: U17s <input type="checkbox"/> U19s <input type="checkbox"/> Patrolling Member <input type="checkbox"/> Competitor - Type: Open <input type="checkbox"/> Master <input type="checkbox"/> Over 65 <input type="checkbox"/> Life Member <input type="checkbox"/> General Member (Nipper Parent, Associate) <input type="checkbox"/>	Passport Photo to be Provided - attach here
Emergency Contact Name:	Emergency Contact Number:

### Terms and Conditions:

I agree to the following terms and conditions:

- You are joining for a period of 12 months to Queenscliff SLSC Gym. Each Gym member must maintain a current membership and be over the age of 16 years old.
- Your membership will commence the day you provide payment and your passport photo
- Queenscliff SLSC Management has the right to suspend and/or terminate any membership for non-payment of fees or for behaviour inimical to the enjoyment of the Gym by other members. Offensive behaviour will not be tolerated.
- Guests are not permitted into Queenscliff SLSC Gym at any time and any violation of Rules may subject the Gym member to suspension or forfeiture of their Membership.
- Any Gym member who conducts themselves in an unbecoming manner or who knowingly violates any of the Membership Rules may be denied access to Queenscliff SLSC Gym or may have their membership suspended or forfeited. The Queenscliff SLSC Gym through its elected offices reserves the right to review and change these rules from time to time.
- Good order, proper attire including appropriate footwear, no bare feet allowed, decorum and consideration of the rights and comforts of others must be observed at all times. Gym Bags are not to be left on the floor.
- Queenscliff SLSC will not be responsible for loss or damage to any personal property of the Gym member.
- Any complaints regarding the conduct of members should be reported directly to the Queenscliff SLSC Management Committee in writing.
- All members must carry their swipe tag and have their passport photo on the wall whilst using the Gym.
- Membership is to be paid in advance for use of the Gym.
- No alcoholic beverages or food are to be permitted in the Gym at any time. No use of equipment under the influence of alcohol.
- Beverages such as water consumed during a workout must be in a container with a lid. Members must clean any spills immediately.
- All Gym members must use a towel and wipe down equipment after use.
- Gym members shall pay for any loss or damage to property for which they are responsible. No property is to be lent or removed from the Gym area by any member without the approval of the Queenscliff SLSC Gym Management Committee.
- Queenscliff Gym is not responsible for any trainers or fitness instructors, members using Gym equipment do so at their own risk.
- Members should be aware of their personal fitness limits. Use of Gym equipment and exercise may be strenuous. Exercise at your own level and pace.
- Members must not at any time park in the car spots outside the Gym, these parking spots are not for Gym usage and Members parking in these areas are at risk of a parking infringement notice from Manly Council and also may result in their membership being suspended.
- Any private property which may be left in the Gym may be disposed of without notice. Queenscliff SLSC Gym is not responsible for the damage or loss of any property.
- All Equipment must be returned to its proper place after use. Doors are not to be propped open.
- Smoking is not permitted in the entire building. No chewing gum in the Gym.
- Dogs are not allowed in the Gym.

# Queenscliff Gym Membership Application – Health Check

*All Gym membership applicants are required to complete the following questions and submit the health check form with their Gym membership application.*

Common sense is your best guide when you answer these questions. Please read the questions carefully and answer each one honestly by circling YES or NO

<b>1. Has your doctor ever said that you have a heart condition and that you should only do physical activity recommended by a doctor?</b>	<b>YES / NO</b>
<b>2. Do you feel pain in your chest when you do physical activity?</b>	<b>YES / NO</b>
<b>3. In the past month, have you had chest pain when you were not doing physical activity?</b>	<b>YES / NO</b>
<b>4. Do you lose your balance because of dizziness or do you ever lose consciousness?</b>	<b>YES / NO</b>
<b>5. Do you have a bone or joint problem (for example, back, knee or hip) that could be made worse by a change in your physical activity?</b>	<b>YES / NO</b>
<b>6. Is your doctor currently prescribing drugs for your blood pressure or heart condition?</b>	<b>YES / NO</b>
<b>7. Do you know of any other reason why you should not do physical activity?</b>	<b>YES / NO</b>

Talk with your doctor by phone or in person BEFORE you start becoming much more physically active or BEFORE you have a fitness appraisal. Tell your doctor about this questionnaire and which questions you answered YES.

**PLEASE NOTE:** If your health changes so that you then answer YES to any of the above questions, tell your fitness or health professional and ask whether you should change your physical activity plan.

**Declaration and Waiver:**

I realise that participation in exercise carries some risk. I hereby certify that I am aware of no medical conditions (except any already noted herein) that may increase my risk of illness or injury due to an exercise programme. I have read and understood this questionnaire and hereby exempt, release and discharge Queenscliff Surf Life Saving Club and it's Gym, it's management committee and members from liability for any injury as a result of my participation in any exercise programme.

I, the undersigned, in consideration of, and as a condition of, acceptance of my entry to the Gym, for myself, my heirs, my executors and administrators, waive all and any right or cause of action which I or they might otherwise have arising out of the loss of my life or injury and damage, or loss of any description whatsoever which I may suffer.

This waiver, release and discharge shall operate separately in favour of all persons, corporations and bodies involved or otherwise engaged in the operation of the Queenscliff Surf Life Saving Club and its Gym.

I have read the rules and understand them and will abide by them.

Signature:

Date:

\_\_\_\_\_

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Parent/Legal Guardian Consent

Signature

Name \_\_\_\_\_

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