

Range Community Gym and Fitness Centre(Mapleton)
Association Inc

In order for us to assess your health and fitness needs, please take a few moments to complete these questions. Information is provided for Instructor's use only and remains strictly confidential



NAME: _____ Date of Birth _____ Sex M / F (please circle)

RESIDENTIAL ADDRESS: _____

POSTAL ADDRESS: _____

EMAIL ADDRESS: _____

HOME PHONE NUMBER: _____ MOBILE PHONE NUMBER: _____

OCCUPATION: _____

EMERGENCY CONTACT NAME: _____ PHONE NUMBER: _____

Have you attended a fitness centre before? YES / NO

What prompted you to come today? _____

How would you describe your current fitness and health? _____

What results are you hoping to achieve? (please tick)

- | | | | |
|---|--|---|---|
| <ul style="list-style-type: none">• Weight loss• Weight gain• Increase strength | <ul style="list-style-type: none">• Reshaping• Stress management• Toning | <ul style="list-style-type: none">• Decrease body fat• Improve self esteem• Increase energy | <ul style="list-style-type: none">• Increase stamina• Improve fitness• Improve health |
|---|--|---|---|

Other specify _____

On a scale of 1 to 10 how important is it for you to achieve your goals (please circle)

1 2 3 4 5 6 7 8 9 10

How many times a week will you use the Gym to achieve your goals?

Do you have or have you ever had? (Please tick)

- | | | |
|---|--|---|
| <ul style="list-style-type: none">• Heart trouble or disease• Arthritis• Hernia• Back problems | <ul style="list-style-type: none">• Chest pains• Anaemia• Diabetes• High blood pressure | <ul style="list-style-type: none">• Fainting or dizzines• Joint problems• Epilepsy• Asthma |
|---|--|---|

Other health information or recent surgery (specify): _____

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Do you smoke? *(Please circle)* YES / NO

Are you pregnant? *(Please circle)* YES / NO If so, how many months? _____

Have you been advised/encouraged to start an exercise program by:

- Doctor
- Physiotherapist
- Other *specify*
- Chiropractor
- Friend/family
- Partner
- Parents

PLEASE DESCRIBE YOUR EXERCISE NEEDS

MOTIVATION *(please tick)*

- I need no motivation
- I could have some trouble staying motivated
- I find exercise easier with a friend
- I would find exercise easier with regular help.
- I need constant motivation with an exercise program

WEIGHT CONTROL

- I find it very hard to lose weight, I gain weight easily and have to monitor everything I eat
- I can lose or gain weight by adjusting my activity level and changing my eating habits
- I can eat what I want and never gain weight. I find it hard to put on weight

DATE FORM COMPLETED: ___ / ___ / ___

Range Community Gym and Fitness Centre(Mapleton) Association Inc

I have completed these questions accurately and truthfully and there is no reason that I should be precluded from engaging in gymnasium work or the like. I authorize Range Community Gym and Fitness Centre (Mapleton) Association Inc or its agents, contractors, servants or other duly authorized persons to obtain whatever assistance they deem necessary should an accident or injury occur.

I agree to observe and abide by the terms and Rules of the Association to fulfill the above financial commitments even in the event of me not attending the Range Community Gym and Fitness Centre (Mapleton) Association Inc or utilizing its services. I agree that gymnasium work can be a dangerous activity and involves some risk, including but not limited to accidents, injury and failure of equipment. I voluntarily accept all risks of engaging in gymnasium work or the like and hereby relinquish and waive any right (including but not limited to any right based in negligence) that I might otherwise have against Range Community Gym and Fitness Centre (Mapleton) Association Inc, its officers and members in respect of any injury, loss of life, loss or damage to property, and any other loss whatsoever arising out of or incidental of my use of the Range Community Gym and Fitness Centre (Mapleton) Association Inc. facilities and equipment and I shall indemnify Range Community Gym and Fitness Centre (Mapleton) Association Inc. in respect of any claim or demand based on any such right and in respect of any claim or demand arising out of or contributed to by any act or admission on my part.

Rules of the Association, the terms by which I agree to observe and abide by, acknowledge membership is non-refundable and that any transfer or suspension is at the sole discretion of Range Community Gym and Fitness Centre (Mapleton) Association Inc. and must be applied for in writing. Range Community Gym and Fitness Centre (Mapleton) Association Inc. reserves the right to itself and its agents, contractors, servants and others authorized by it to remove from any premises occupied by it or restrict entry into any premises by it or by any person or persons whether a member or not who is deemed to have engaged in behavior which is injurious or prejudicial to the character or interests of the Association including but not limited to acts of moral ineptitude or conduct which constitutes a nuisance to any other person. No refunds shall be given to any members or his/her guest who is removed.

Member's Name: *(please print)* _____

Signature _____ Date _____

(Where the member is under 18 years of age, consent of parent/guardian is required)

Parent/Guardian: *(please print)* _____

Signature _____ Date _____

Office use

Accepted on behalf of Range Community Gym and Fitness Centre (Mapleton) Association Inc.

Proposer: *(please print)* _____

Signature _____ Date _____

Seconder: *(please print)* _____

Signature _____ Date _____