

GYM & PERSONAL TRAINING

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PERSONAL DETAI	LS				
Name:	l N		Male / Female		
Address:		·			
Home Tel:	Mobile / Work Tel:				
Email:		·			
Date of Birth:		Height		Weight	
NEXT OF KIN					
Name:	Relationship				
Address:		·			
Home Tel:	Mo		Mobile / Work Tel:		
		·			
DOCTOR					
Name:					
Address:					
Tel:					

HEALTH QUESTIONIRE

To assist us in providing you with the best possible service and care, we ask that you please read and answer each question carefully adding any further information you feel is necessary. The information contained in this questionnaire is kept in the strictest of confidence.

Circle as appropriate

1. Have you ever been diagnosed with any form of heart problems	Yes / No			
2. Have you ever experienced any chest pain whilst undergoing any activity	Yes / No			
3. Are you currently taking any medication for a heart condition	Yes / No			
4. Do you suffer from any bone or joint problems	Yes / No			
5. Have you ever been diagnosed with Diabetes, Epilepsy, Asthma or any other condition	Yes / No			
6. Are you pregnant	Yes / No			
7. Have you recently had a baby	Yes / No			
8. Have you undergone any type of surgery in the last 3 months	Yes / No			
9. Do you ever feel dizzy, lose your balance or lose consciousness	Yes / No			
10. Are you or have you been unwell recently with a cold or flu etc	Yes / No			
11. Do you have any other condition that may affect your physical ability	Yes / No			
Please give any further information you feel may be necessary				

If you have answered YES to any of the questions above we ask that you please seek Permission from your doctor before undertaking any physical activity.

If your health changes during your membership and any of the above become applicable to you we ask that you please inform a member of staff as soon as possible.

TERMS AND CONDITIONS OF MEMBERSHIP

- 1. Memberships are applicable only to those named on the membership card.
- 2. Membership is not transferable.
- 3. Membership is not refundable.
- 4. Members will only use the complex during the opening times displayed.
- 5. All prices are inclusive of VAT.
- 6. People under the influence of drink or drugs will be asked to leave the gymnasium.
- 7. Members are to abide by safety notices at all times.
- 8. Gymnasium staff or Physical Limits Gym accept no responsibility for loss or damage to personal property or personal injury.
- 9. No pets allowed.
- 10. Admission will be subject to the availability of facilities.
- 11. Price increases will be displayed in advance. In case of membership price increases, members will only be subject to them on renewal of their current membership.
- 12. Management reserves the right to close the facility without prior notice.
- 13. Management reserves the right to refuse or cancel membership at any time (pro-rata membership refund upon cancellation).
- 14. Members must sign in upon arrival.
- 15. Management reserves the right to alter the terms and conditions of membership without prior notice.
- 16. Management cannot accept liability for member's fitness and ability to undertake any form of exercise. Members in any doubt of this matter or those undergoing medication or medical treatment should consult their doctor before using facilities.
- 17. Members should complete and return this document before using the facilities.
- 18. Gym equipment is not to be used until adequate training is received from a member of the gymnasium staff.
- 19. Formal confirmation for the cancellation of any membership must be given to avoid additional fees.
- 20. Food or drink brought from outside the gymnasium should not be consumed on the premises.
- 21. Members shall abide by the club rules (displayed throughout the premises and on the website) at all times.

DECLARATION

I have read and understood the questionnaire and completed it to the best of my knowledge. Any questions that I may have had have been answered to my full satisfaction.

I agree to use the fitness equipment, I am over 16 years of age and have read, understood and will abide by the Terms and conditions of membership.

Signature:	 Date:
Print:	