



# LSCO Fitness & Activity Membership Terms & Waiver

Today's Date \_\_\_\_\_ LSCO MEMBER  YES  NO

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone (H) \_\_\_\_\_ Cell \_\_\_\_\_

Date of Birth \_\_\_\_\_ LSCO Membership # \_\_\_\_\_

### **Emergency Contact Information**

Full Name \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Telephone (H) \_\_\_\_\_ Cell \_\_\_\_\_

### **Terms**

- Members of LSCO:** Individuals must hold a current year paid in full LSCO membership and a monthly or yearly Fitness Centre membership to access the Fitness Centre. To participate in physical activity programs or classes fees must be paid.
- Non members of LSCO:** must pay fees in full and prior to accessing the Fitness Centre and any physical activity programs or classes.
- Failure to remain current on LSCO membership fees, program or class fees for the present year will result in discontinued access.
- A CSEP/Health Canada Physical Activity Readiness Questionnaire/PAR-Q is required to be completed with this application form. If deemed prudent by LSCO; LSCO reserves the right at any time to require the applicant to consult with their Physician before engaging in activity at the LSCO. A CSEP/ Health Canada "PARmed-X Physical Activity Readiness Medical Examination" form is provided to you with this application packet; and may be needed to be completed in the event a physician's consent is requested by LSCO. LSCO reserves the right at any time to refuse access to the Fitness Centre and any physical activity programs or classes for medical reasons.
- Membership, programs and classes are non-transferable. LSCO memberships are non refundable.
- LSCO makes no representations or warranties as to the appropriateness of the Fitness Centre membership for applicants.
- I have read a complete copy of the "Fitness Centre Rules and Regulations" and Membership Terms on this form, and agree to comply at all times while using the facility and its equipment.

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_



## User Agreement, Release and Waiver of Liability

1. To the best of my knowledge, I am physically sound and have medical approval by my doctor to participate in physical exercise activities of the type normally engaged in a voluntary / non profit health and fitness facility and physical activities like those offered at LSCO.
2. I understand and agree that I am responsible for learning how to use the equipment properly and safely. I will attend a mandatory orientation on equipment usage, and follow the rules and regulations of the fitness facility. I am responsible for establishing and maintaining my own exercise program. Should instruction be offered, I hold myself solely responsible for any potential injuries that may occur.
3. I understand the Lethbridge Senior Citizens Organization Centre reserves the right to change or cancel the continued availability of the Fitness Centre and physical activities without liability to me. No lease, license or bailment is created by my use of the Fitness Centre or physical activities. I hereby release LSCO its Officers, Board, staff, volunteers, conveners, members, and agents from any and all liability, claims, demands, actions and causes of action whatsoever arising out of, or related to any loss damage or injury, including death that may be sustained by me, or to any property belonging to me, while participating in physical activity, or while on or upon the premises where the program / activity is being conducted.
4. I agree to refrain from using equipment that is determined by LSCO, including its staff, volunteers, instructors and members as being defective or needing maintenance or repair.
5. I understand there is a risk of personal injury, death, or loss of or damage to personal property by my participation in the programs of the LSCO, and that I fully assume all responsibilities and liability of risk from my participation.
6. I understand and agree that my use of the Fitness Centre and physical activities is voluntary.
7. In consideration of the acceptance of this participation agreement, I, the undersigned on behalf of myself, my estate, my heirs, my executors and administrators hereby release the LSCO from any and all liability that may arise (including death) from my use of the LSCO fitness centre and participation in physical activities.
8. My signature on this waiver is evidence I was informed by the organization that before participating in any physical activity at LSCO, located at 500 – 11 St. S., Lethbridge, AB, I should check with my physician to see if the exercise equipment, physical activities and instructions are suitable for my health and physical condition.
9. I HAVE **CAREFULLY READ THIS USER AGREEMENT, RELEASE AND WAIVER OF LIABILITY, AND I KNOW ITS CONTENTS. I HAVE VOLUNTARILY SIGNED OF MY OWN FREE WILL AND ACCORD.**

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ 20 \_\_\_\_

Printed Name of Witness: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ 20 \_\_\_\_



# Fitness Centre & Physical Activity Rules and Regulations

1. All members are strongly recommended to schedule a **FREE** orientation in the Fitness Centre before use to ensure their own safety.
2. **DRESS CODE: Bare feet, stocking feet, sandals, and open toed shoes are strictly prohibited.** Fitness Centre members are asked and encouraged to attend the facility in proper gym attire. However it is understood this may not always be practical. Shirts must be worn. **Gym (athletic) shoes must be dedicated solely for indoor use and should be non marking.** Outside footwear must **NOT** be worn. Clothing and belts with rivets and buckles that may damage seats and fabric surfaces are inappropriate. For safety, exposed wallet chains and key chains are prohibited.
3. No food or drink (other than water bottles) is allowed.
4. Be courteous when using the equipment. Please allow 30 minutes maximum on the cardio equipment.
5. Participants are strongly encouraged to work out in a "buddy system."
6. Please clean equipment **before & after** each use with the antiseptic wipes provided. This will ensure the equipment is sanitized for your use. Return free weights to the rack after use.
7. LSCO is not responsible for any personal belongings lost or stolen in the facility.
8. Please report any equipment problems to the Program Coordinator.

Initial: \_\_\_\_\_

Date: \_\_\_\_\_

*Please check activities you are or may be participating in:*

\_\_\_\_\_ Badminton

\_\_\_\_\_ Fitness Classes

\_\_\_\_\_ Table Tennis

\_\_\_\_\_ Keep Fit

\_\_\_\_\_ Fit Ball

\_\_\_\_\_ Line Dancing

\_\_\_\_\_ Fitness Centre

\_\_\_\_\_ Scottish Dancing

\_\_\_\_\_ Nordic Walking

\_\_\_\_\_ Pickleball

\_\_\_\_\_ Tai Chi

\_\_\_\_\_ Active Aging

\_\_\_\_\_ Qigong

\_\_\_\_\_ Yoga

\_\_\_\_\_ Other (please list)