

Peacock Gym Enrolment Application

Enrolment Fees : Adult £15 / Child £3

Gymnasium Fees: Adult £3 per session / Child 50p per session

Title: Mr / Mrs / Miss / Ms

Forenames: _____ Surname: _____

Address: _____

_____ Post Code: _____

Home Number: _____ Office Number: _____

Date of Birth: _____ Mobile Number: _____

Date Joined: _____ Place of Birth: _____

I wish to enrol as a member of PEACOCK GYMNASIUM and I understand that neither the gym nor the officers thereof, shall be liable to any member or guest for any loss of damage to any property occurring on the gymnasium premises nor for any injury sustained by any member or guest while on the gymnasium premises.

Signature: _____ Date: _____

(i) Two Passport photographs must accompany this application.

(ii) Should you be encountering financial problems and are unable to pay the required enrolment, and gym fees, please let us know so that we may endeavour to assist you.

INDUCTION

Inductions are available, but are not compulsory: if you wish to have an induction they take place on the second Saturday of every month, starting at 10:30 and lasting approximately an hour. Induction fees cost £5.

PRE-EXERCISE MEDICAL QUESTIONNAIRE

You MUST answer YES or NO to each of the following questions.

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| 1. Has your doctor ever said you have a heart disease or any other cardiovascular problem? | Yes / No |
| 2. Is there a history of heart disease in your family? | Yes / No |
| 3. Has your doctor ever said you have a high blood pressure? | Yes / No |
| 4. Do you ever have pains in your heart & chest after undergoing minimal exertion? | Yes / No |
| 5. Do you often get heartaches, feel faint or dizzy? | Yes / No |
| 6. Do you suffer from pain or limited movement in any joints or bones which have either been aggravated by exercise or might be made worse by it? | Yes / No |
| 7. Are you taking drugs or medication, or recuperating from a recent illness or operation at the moment? | Yes / No |
| 8. Do you have any other condition which might affect your ability to participate in exercise? | Yes / No |
| 9. Are you over 35 and unaccustomed to physical exercise? | Yes / No |

If you answered YES to one or more questions consult your doctor BEFORE starting any form of circuit/weight training. Ask his or her advice as to whether or not you can undertake unrestricted physical training/activity on a gradually increasing basis. If your doctor suggests only restricted or supervised activities for an initial period discuss whether circuit/weight training will fulfill these criteria.

if you answered NO to all the questions you should feel reasonably assured that you are ready to begin.

I have read, answered and understood the questions above.

Print _____ Signature _____ Date _____