## **APPLICATION FORM**

Complete the form below to sign up for membership to Teed Up Fitness



■ Personal Details							
Name	:						
Full Address	:						
City / Country	:	Postcode :					
Date Of Birth	: D D M M Y Y	E-Mail :					
Mobile	:	Agree to sign up to news, reminders:					
■ Emergency Contact							
Name	:	Relationship to you :					
E-Mail	:	Mobile :					
Mom	bership						
I MEITH	bership						
Six Moi	nthly Membership	Weekly					
Twelve	Monthly Membership	Fight Club					
■ Payment Details							
Online	( use QR Code)	Credit Card					
Direct I	Debit						
BSB -	Account #	MM/YY CVC					
■ Please	e indicate if you suffer froi	m or have any of the following:					
Any h	neart or stroke conditions	Hernia					
Famil	ly history of heart disease or stroke	Epilepsy or fits					
High	blood pressure	Fainting attacks					
Pain o	or tightness in the chest	Back problems					
Diffic	ulty in breathing or chronic cough	Asthma					
Diabe	etes	Other					
Have you ever had any injury, illness, back or joint conditions that may be aggravated by vigorous exercise?							
If yes provide Yes	e details.  No						

## Personal Details Do you have any other medical conditions that we should know about? If yes, please provide details. Yes Are you pregnant? Yes No If you have answered yes to any of the above, for your own safety we urge you to provide a medical certificate before using the Gym. Conditions of Entry To ensure this Gym is a friendly and enjoyable place for people to exercise, please be mindful of the following conditions of entry: Please wear training shoes and appropriate gym attire at all times Please replace weights after use Please do not drop the weights Remember to always use a towel Keep your membership card or receipt of entry payment handy in case Centre staff need to see it Please don't bring food into the gym Please respect the rights of others and don't use abusive, disruptive or offensive language or act in an offensive manner Children under the age of 16 years are not permitted in the gym unless granted prior permission by Centre Management Risk Warning You acknowledge and agree that: • Your participation in exercise at the Centre is a recreational activity which involves a risk of physical harm, injury or damage to you ■ Physical harm that might arise from your participation in exercise or use of any equipment at the Centre includes, but is not limited to bone/joint/muscle breakages, sprains and strains, bruising, concussion, cuts and abrasions, dehydration, dental damage, joint injuries, nose injuries and stress fractures ■ The degree of risk and extent and type of physical harm, injury or damage may vary depending on the nature of the exercise or activity involved in ■ You must not use Centre facilities or participate in Centre activities if such use or participation will adversely affect your physical or mental wellbeing ■ The Centre is in no way responsible for determining whether you are physically or mentally able to use the facilities or participate in exercise ■ You have made the necessary enquiries and received the necessary medical advice to ensure your use of the Centre facilities and participating in exercise will not in any way adversely affect your health or wellbeing

## (physical or other) Release and indemnity

- You have read and understood this membership application form and hereby exempt, release and discharge the Centre, its servants, agents and contractors from liability for any injury or damage to your personal property as a result of your use of or participation at the Centre
- You, your heirs, executors and administrators, waive all and any right or cause of action which you or they might otherwise have arising out of the loss of your life or injury and damage, or loss of any description whatsoever which you may suffer
- You indemnify the Centre from any or all actions or liability in any way the result of your conduct whilst at the Centre

80A Fitzmaurice Street, Wagga	Processed :	Yes	No
0466 323 042			
www.teedupfitness.com.au	Team Member :		