

SWEAT FITNESS GROUP TRAINING REGISTRATION FORM

Please fill out the necessary details. It is important that the medical questionnaire is completed and signed as well as the terms and conditions of the contract.
Thank you for taking time to complete your application carefully and we look forward to welcoming you to our family.

PERSONAL DETAILS

Full Name _____
Date of Birth _____
Physical Address _____
Cellphone Number _____
Email Address _____ Age _____

EMERGENCY CONTACT DETAILS

In case of emergency, please notify:

Full Name: _____ Cellphone number _____
Relationship: _____

YOUR DOCTOR'S DETAILS

Doctor's Name _____
Doctor's Number _____
Doctor's Physical Address _____

MEMBERSHIPS

Please circle the option you choose.

	2 MONTHS	3 MONTHS	6 MONTHS	12 MONTHS
Normal	N\$ 600 per month	N\$ 580 per month	N\$ 520 per month	N\$ 500 per month
Student	N\$ 350 per month	N\$ 330 per month	N\$ 320 per month	N\$ 300 per month

Sessions run every:

- Monday - full body, cardio, core, upper etc.
- Tuesday - Run Day
- Wednesday - Yoga with Ros
- Thursday - full body, cardio, core, upper etc.
- From 6pm - 7pm at Windhoek High School Gym, High Performance Centre.

CONSENT TO EXERCISE

Exercising is an essential part of maintaining a healthy lifestyle. Some people however are unable to participate fully due to illness or other medically restrictive reasons. It is therefore important that the following questions are answered fully and honestly to enable us to ensure that our members can exercise safely.

Please ensure that you sign the declaration below.

Physical Activity Readiness Questionnaire (PARQ) Please tick.	YES	NO
Have you, for any reason, been unable to exercise in the past?		
Has your physician ever advised you against exercising?		
Have you ever suffered from cardiac (heart) related illness?		
Have you ever suffered respiratory difficulties?		
Have you ever suffered from fainting, migraines, or loss of balance?		
Have you ever suffered from any bone, joint, muscle related issue?		
Is there any history of heart disease in your family?		
Have you ever experienced chest pain whilst exercising?		
Do you have high blood pressure?		
Do you have elevated cholesterol levels?		
Are you currently taking prescribed medication?		
Do you know of any other reason why you should not do physical activity?		

If you answered 'yes' to any of these questions, please contact your GP before commencing training. All the information is held in the strictest confidence and accessible only by the gym coordinator and HR.

PAYMENT POLICY

Payment is due no later than 7 days before commencing training. If we do not receive payment by this date, we cannot guarantee that your place will be reserved. All payments can be made in cash or EFT (*please use your full name as reference*):

Bank: First National Bank
Acc Name: SWEAT FITNESS CC
Acc no: 62267856626
Branch code: 282273, Maerua Mall
Swift Code: FIRNINANX

REFUND POLICY

Please plan on attending all your sessions. All sales to SWEAT FITNESS are final, and no refunds will be given. If by the end of the month you have not attended all the sessions, they will be forfeited.

CANCELLATION POLICY

First of we want to let you know that this policy is as important for you as it is for us. A strong cancellation policy keeps you accountable and ensures that you keep your commitment to yourself. The reality is that for most people, exercise is either a chore or a time granted luxury. It becomes easy to skip your workout if you are feeling a bit tired, stressed at work, or need to take care of some things at home. However, when clients know they will be charged for a session if they don't show up, it forces them to prioritize their health and fitness. It is **consistency** that ensures great results for our clients and we always want to put your goals first. We are here to make sure you do the things that sometimes you don't really want to do, but know you **NEED** to do.

That being said; let's review our cancellation policy.

SWEAT FITNESS operates on a basis whereby when you pay for boot camp for the month, you are entitled to attend every session we during that month. Should you be unavailable to attend a session it will be forfeited. We know you appreciate our time and ability to schedule you for sessions, we want you to know that we also value your time. Because of this we will reciprocate by offering our clients the same courtesy. Should a session be cancelled because of something on our end - we will replace it in the following month. No additional charge will be levied should a client cancel not be able to attend a session. We just ask that you kindly give us enough notice (2 hours before class) so we can adequately plan our session for that day.

MARKETING POLICY

SWEAT FITNESS & those acting under its authority reserve the right to use photographs, video, artwork or other likenesses of the participant for marketing, publishing or any other lawful purpose in perpetuity and any number of times.

YOUR RESPONSIBILITIES

I additionally acknowledge and understand the following personal obligations as a participant in training:

- To arrive to each camp session on time
- To ensure I always bring a water bottle, towel and a sense of adventure to each session
- To plan my weekly meals as nutrition is an important factor to achieving my fitness goals
- To engage in appropriate pre-exercise warm-up and post-exercise cool-down stretching and flexibility exercises
- To use exercise equipment and perform as directed

DISCLAIMER

Please take a moment to carefully read the following information and sign where indicated.

I _____, have voluntarily enrolled in a structured, group training program offered by SWEAT FITNESS.

I understand that the group fitness training I will receive is provided for the purpose of exercise instruction and guidance. I affirm that I have stated all my known medical conditions and answered all questions honestly.

I agree to keep my trainers updated as to any changes in my medical profile and understand that there shall not be liability on the trainer's part should I forget to do so. I understand that I have enrolled in a health and fitness program offered through SWEAT FITNESS.

I recognize that the program may involve strenuous physical activity including, but not limited to, muscle strength and endurance training, cardiovascular conditioning and flexibility training, and other various fitness activities. I hereby affirm that I am in good physical condition and do not suffer from any known disability or condition which would prevent or limit my participation in this exercise program.

I fully understand that I may injure myself as a result of my enrollment and subsequent participation in this program and I hereby release SWEAT FITNESS and affiliates now or in the future for conditions that I may obtain. These conditions may include, but are not limited to muscle strains, muscle pulls, muscle tears, broken bones, shin splints, heat prostration, death, injuries to knees, injuries to back, injuries to foot, or any other illness or soreness that I may incur.

Signature: _____

Full Name _____

Date of registration: _____