



FITNESS CENTER MEMBERSHIP AGREEMENT

Name: _____ Birthday _____
LAST FIRST MI

List other members: _____ Birthday _____

Address: _____ City/Zip: _____

Home #: _____ Work #: _____ E-Mail: _____

Emergency contact: _____
NAME PHONE RELATION

Type: ___ single, ___ sr. single, ___ couple, ___ sr. couple, ___ family, ___ student, ___ corporate, ___ other

Name of business for corporate membership: _____

Check one: _____ months, ___ Punch card, ___ 1 yr/pd in full, ___ 1 yr/monthly pay, ___ Mt. Stuart

Membership begins: _____ Membership ends: _____

Payment: Cash Check CC Amount (incl. tax): _____ Received by: _____

Monthly Payment: CC ACH Monthly Payments (incl. tax): _____

MEMBERSHIP EXTENSION

Membership begins: _____ Membership ends: _____ Initial _____

Membership begins: _____ Membership ends: _____ Initial _____

MEMBERSHIPS ARE NOT TRANSFERABLE

NOTICE AND RELEASE

I accept and clearly understand that there are inherent and other risks involved in performing physical activity such as weight lifting and other activities; that injuries are a common and ordinary occurrence of these physical activities, and I freely assume those risks. In recognition of the possible dangers connected with any of these activities, the undersigned hereby releases Balance Point Health & Fitness LLC, its owners, officers, agents, employees or instructors from any and all liability for damage or injury to myself or my person or property and including damages or injury due to the negligence by Balance Point Health & Fitness, L.L.C., its officers, agents, employees or instructors.

Signature _____ Date _____

How did you hear about us? Newspaper _____, Drive-by _____, Friend _____, PT _____, Local _____, Other _____



IN ORDER TO PRESERVE EQUIPMENT, PREVENT INJURIES AND SHOW CONSIDERATION TO OTHERS, THE FOLLOWING POLICIES HAVE BEEN IMPLEMENTED.

Fitness Center Rules:

- Persons under 13 years of age are not permitted to work out *unsupervised* unless they complete a Personal Training session and receive approval. All members under 18 must have a signed release by their parent or guardian.
- Shirts and athletic shoes are required. Lockers and cubbies are available for personal belongings (i.e. coats, gym bags).
- Be considerate to others. Do not rest on machines when others are waiting to use the same machine.
- No food or drinks are allowed in the gym (water bottles accepted).
- Profanity or suggestive language will not be tolerated.
- Only Certified Personal Trainers, authorized by Balance Point Health & Fitness, LLC, may conduct personal training with members.
- Please wipe off your equipment after each use in consideration of the next user.

Equipment Use:

- Read all instructions before operating machines.
- If you have any questions, or are unfamiliar with equipment, please ask a staff member for assistance.
- Do not jerk, bounce, slam or drop weights.
- Return plates and dumbbells to their racks when done.
- Spotters and collars are recommended when using free weights.
- Time Limit: Cardiovascular equipment use limited to 30 minutes during busy time when machines are full.
- Please report defective equipment to staff immediately.

BALANCE POINT HEALTH & FITNESS, LLC, ITS OWNERS AND/OR EMPLOYEES ARE NOT RESPONSIBLE FOR LOST, STOLEN OR DAMAGED ARTICLES OR PROPERTY.

BALANCE POINT HEALTH & FITNESS, LLC, RESERVES THE RIGHT TO REFUSE, CANCEL OR TERMINATE A MEMBERSHIP WITH NO REFUND IF THESE RULES ARE VIOLATED.

THESE RULES ARE SUBJECT TO CHANGE WITHOUT NOTICE.

I, _____, have read the above and understand that my membership is contingent on adherence to these rules.

Signature: _____

Date: _____