

Please Print Name On The Line Below:



FITNESS FACILITY RULES & REGULATIONS

The following Rules & Regulations as set forth are part of participant's agreement and participants are obligated to observe and comply with the same.

- 1. No one is allowed to use or be permitted to the fitness facilities unless they are a member in good standing, or a registered guest with the Bowling Green Parks & Recreation Department Fitness Division.
- 2. Signing In: All participants, upon each visit are required to scan/card in.
- 3. All members must have their membership card with them while at the fitness facility.
- 4. No food and/or tobacco in any form will be permitted in weight room area.
- 5. Gym/duffle bags are permitted in the designated area. Please hang coats on the coat rack.
- 6. Absolutely no horseplay allowed.
- 7. The use of profanity or clothing with suggestive or profane sayings is not allowed. Clean proper attire must be worn.
- 8. Shirts and shoes must be worn at all times. Open toe shoes such as sandals/flip-flops are not allowed.
- 9. Collars/clamps must be used on all barbells.
- 10. Break down all weights and replace dumbbells after use. Failure to do so will result in suspension of membership.
- 11. Locker rooms are for current members only.
- 12. Please do not bang or drop the weights or dumbbells. Misuse/abuse of equipment will result in suspension.
- 13. All fitness equipment (dumbbells, mats, balls, etc.) are to remain inside the fitness areas at all times.
- **14.** Valuables: Bowling Green Parks & Rec. Department is not responsible for the loss, theft of, or damage to, personal property.
- **15.** Maintenance of Facilities: In order to ensure that the B.G. Parks & Rec. Facility is properly maintained, Bowling Green Parks & Rec. reserves the right to temporarily close at any time during the year. Any days lost due to being closed, will be added to your next month's expiration date.
- **16.** Participants Violations: Participants privileges may be suspended or revoked at any time by any B.G. Parks & Rec. Staff, for a participant's breech of rules or regulations, other undesirable behavior, or violations of the terms and conditions of the participant's agreement. Suspension of such privileges shall not entitle participants to a refund.
- **17.** Any equipment (including mirrors) broken, cracked or damaged due to member misuse, abuse, carelessness, or recklessness will result in repairs being billed to member.

18. TI	nere is a \$5 re	placement fee f	or lost kev fob	s. There is a	\$5 fee for t	forgot card af	ter first warning
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I have read the rules and regulation and understand them. My questions (if any) pertaining to the above rules/regulation have been satisfactorily answered.

Participant's Signature	Date			
Staff Signature				



INFORMED CONSENT FORM

Please Print Legibly



NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:
PHONE NUMBER:	BIRTHDATE:	AGE:
***MEDICAL PROBI	LEMS: IF YOU DO NOT HAVE ANY, PLEA	ASE WRITE DOWN <u>*NONE*</u> :
EMERGENCY CONTACT:		
NAME:	RELATIONSHIP:	
PHONE NUMBER:		
to the weight room, selectorized equiphysical fitness. I understand that these activiti attempt to improve its function. The reaccuracy. There is a risk of certain chiblood pressure or heart rate, ineffective There is also the possibility of muscular I realize that it is necessary for abnormality or distress. I consent to the I further understand that persoconditions are not to participate in this I have read the foregoing and largee that the use of the City of Bowling agree that the use of the City of Bowling room, selectorized equipment, cardio reto abide by the regulations and policies Bowling Green allowing me to participate and indemnify the City, its officials, officials of action for any personal injury participation in fitness activities and procurring during fitness activities or procunderstand that this release includes, wand equipment, my receipt of instruction or instruction, the malfunctioning of any Fitness Facility or surrounding premise and all claims against the City of Bowling fitness activities and programs or the unbased on the alleged negligence or ground in the alleged n	pment, cardio room, aerobics, racquetball les are designed to place a gradually increseaction of the cardiovascular system to suranges occurring during or following the exercive "heart function", and possibly, in some r strain, sprains, and/or other types of injurior me to report promptly to the exercise surans with a history of back trouble, heart diseactivity without providing the instructor with a understand it. My questions have been and green Fitness Facility Activities / Programoom, aerobics, racquetball and locker room, a for the Bowling Green Parks and Recreation ate in fitness activities and programs, I agreed the infitness activities and programs, I agreed the infitness activities and programs, I agreed the company of the City facility or in any params or while using the City facility, including the company of the company and t	pervisor any signs or symptoms indicating any ation measures deemed advisable. Plase, high blood pressure, and/or other medical a dated doctor's consent form. Provented to my satisfaction. I acknowledge and ms, including, but not limited to, the weight is, is at my own risk. I understand and agree on Department. In consideration of the City of to waive, release, absolve and hold harmless all claims, suits, actions, damages and/or ability, known or unknown, arising out of my way relating to or arising from any incidence ding the City's attorney's fees and costs. I ur as a result of my use of fitness amenities ricipation in any fitness activity, class, program while in or on the City of Bowling Green e an express waiver of and release from any employees arising from participating in the emises, including all claims or causes of action or its officials, officers, agents or employees. City of Bowling Green, its officials, officers, Kentucky law.
EXERCISE SUPERVISOR	PARTICIPANT'S SIC	GNATURE

FITNESS FACILITY AGE POLICY:

*11 Years: May use Cardio, Aerobics, Racquetball, Selectorized, and Locker Rooms w/ parent or adult

*12-15 Years: May use all Fitness Areas w/parent or adult

*16-17 Years: May use all Fitness Areas

*IF PARTICIPANT IS UNDER 18 YEARS OF AGE, SIGNATURE OF PARENT OR ADULT 18 YEARS OF AGE OR OLDER IS NEEDED.



Please answer for reporting & grant funding:



DEMOGRAPHICS

RACE: (Select	t one or more)	American Indian	or Alaska Na	tive:	African Ameri	can:	
Asian:	Native Hawaiian	or Other Pacific Isl	ander:	White:	Hispanic	or Latino:	
GENDER: Mal	le: Female	:					
EMPLOYER:_		WORK PHONE:					
		REF	FUND PO	LICY			
 	All requests for a refund must be made directly to the Fitness/Wellness Supervisor. Refunds will only be given if once you have purchased a membership, you provide us with a written, dated, medical doctor's statement indicating that you are not able to participate in our Fitness program(s) or at our Fitness Facility. Or, if once you have purchased your membership, and during the course of your current (active) membership, you have a change in your medical condition or have sustained an injury/accident that would prohibit you from participating in a physical activity program or at our Fitness Facility, and you provide us with a written, dated, doctors statement indicating such change or restriction.						
 	The amount of refund may not be for the whole purchase price of your membership. Refund amount will be pro-rated for the unused portion of your membership, minus (-) membership card fee of \$10.00. Refunds may take up to two weeks to process and may be in the form of cash, check or credit to your Visa/MasterCard. (If paid by credit card)						
	Memberships threfund.	nat are expired,	suspended	or revoke	d are not el	igible for a	
	I understand the Bo	owling Green Parks a	and Recreation	ı Fitness Fac	ility Refund Poli	cy.	
Ī	Participants Signati	ure			ate		