



# NEW MEMBER SIGN UP FORM RULES AND DISCLAIMER

## Personal Details (Please Print all details)

Name:
Address:
Date of Birth:
Male or Female:
Email Address:
Mobile:
Home No:

## Emergency Contact:

Name:
Relationship:
Contact Tel No:

## Medical Details:

Please detail any medical conditions or injuries that you have had in the last 6 months that may affect exercise at the gym:

## FOR STAFF USE:

Card No:	Schedule Hours:
Fixed Term Option (3, 6 or 12mths & Amount):	Exp Date:
Package Option: (list option taken & Amount):	Exp Date:
Joining Fee:	
Automatic Payment:	Frequency:
How much Paid:	Date Paid:

THE BELOW RULES AND DISCLAIMERS ARE WRITTEN BASED ON HEALTH AND SAFETY REQUIREMENTS AT THE BOI FITNESS HUB. IN RETURN FOR RECEIVING AN ACCESS CARD TO THE GYM YOU AGREE TO:

**GENERAL:**

1. **DO NOT** use equipment that you have not been shown how to use correctly
2. **EQUIPMENT** to be used according to the instructions provided
3. **COLLARS** to be used on **ALL** bars
4. Equipment put **BACK IN IT'S PLACE** after use
5. Follow all **SAFETY** procedures
6. **EXERCISE** within your own limitations
7. Suitable **CLOTHING** and **FOOTWEAR** must be worn at all times
8. **NO CHILDREN UNDER 14 YRS OLD** to be allowed in the fitness Centre
9. **UNDER 16 YRS OLD** is to be **ACCOMPANIED** by an adult
10. **LET NO ONE** into the gym that is not a member
11. Keep the **DOOR CLOSED** at **ALL** times
12. **LIGHTS, TV'S** and **AIR CON** to be **SWITCHED OFF** if you are **LAST** to leave
13. **NO TOWEL** no exercise
14. Put all **RUBBISH** in the bins provided

**PAYMENT TERMS:**

1. **PAY** all membership fees **ON TIME**
2. **AUTOMATIC PAYMENTS**
  - 1) **ONE MISSED** payment you will be advised and payment is to be made **WITHIN 5 DAYS**
  - 2) **TWO MISSED** payments a **LATE PAYMENT FEE** of **\$10.00** will be applied to each missed payment. **GYM ACCESS WILL BE DENIED** and **DOOR CARD STOPPED** and you will be advised the amount owed to clear your account
  - 3) **THREE** missed payments **PAY** to **CLEAR** your account and if you wish to return **STANDARD RE-JOINING FEE WILL APPLY**
3. **FIXED TERM OPTIONS**
  - 1) We will contact you **BEFORE** the expiry date to advise **PAYMENT DATE**
4. Memberships on **HOLD** applied for periods no less than **ONE MONTH**
5. **CREDIT CARD PAYMENTS:**  
Credit Card Number: \_\_\_\_\_  
Exp Date: \_\_\_\_\_  
Csv: \_\_\_\_\_
6. **BANK DETAILS:**  
**ANZ BANK** **06-0493-0562449-05**  
**T&R SMITH FAMILY FITNESS LTD**

**MEMBER SIGNATURE:**

**DATE:**

I have read the above rules and agree to comply. I take full responsibility for my own safety when in BOI Fitness Hub and will not hold BOI Fitness Hub Limited or anyone associated with the Fitness Centre responsible for any injury.

**STAFF SIGNATURE:**

**DATE:**

I have gone through ALL Rules and Disclaimer checklist.