

YES NO Have you had a physical exam within the last year? When? \_\_\_\_\_

YES NO Are you currently taking any medications? \_\_\_\_\_

YES NO Have you ever used free weights before? If yes, how long? \_\_\_\_\_

YES NO Have you ever used weight machines before? If yes, how long? \_\_\_\_\_

YES NO Have you ever used cardio machines before? If yes, how long? \_\_\_\_\_

How many days a week are you hoping to exercise? \_\_\_\_\_

How much time are you looking to spend exercising? \_\_\_\_\_

GOALS

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

\*If currently seeing a physician for a medical condition, please check with your physician before starting an exercise program\*

YES NO Is medical clearance required before you start an exercise program?

WAIVER AND RELEASE:

You agree that if you engage in any physical exercise or activity, or use any of the facility's equipment, you do so at your own risk. You agree that you are voluntarily participating in the use of the fitness center and assume all risk of injury, illness, damage, or loss to you or your property that might result, including but not limited to, any loss or theft of any personal property. You agree to release and discharge THE ZONE Family Fitness & Rec. Center, Inc., its owners, officers, agents, and instructors from any and all claims or causes of action arising out of negligence. If you are held in violation of any of the fitness center's rules and regulations, your membership may be terminated and fees are not refundable. You acknowledge that you have carefully read this Waiver and Release and fully understand that it is a release of liability. You are waiving any right that you may have to bring legal action to assert a claim against us for negligence. You agree to assume all risk of damage, loss, or theft to or of any personal property or personal injury. My signature also acknowledges that I was given a copy of THE ZONE Family Fitness & Rec. Center, Inc. Rules and Regulations and will abide by them.

\_\_\_\_\_ Member Name (Please print) \_\_\_\_\_ Member signature

Witnessed by: \_\_\_\_\_ Date: \_\_\_\_\_