

Staceys Bootcamp Terms and Conditions

IMPORTANT: Please read this document carefully. It is a condition of your use of our services that you comply with These terms and conditions

1. **Warning:** Participation in SBC may be detrimental to your health or your baby or children. Accidents may happen which may result in You or your child being injured. I have read and understood this warning and voluntarily accept and assume the inherent risks in participating in SBC Boot Camp/Personal Training/Aqua Aerobics.

You are responsible for your child/children at all times

2. **Fitness to Participate:**

I am and will continue to be medically and physically fit and able to participate in Boot camp/ Personal Training/ Aqua Aerobics I am not and will not be a danger to others or myself. I will immediately notify SBC of any changes to my fitness and ability to participate. Unless I notify SBC otherwise, I understand and accept that SBC will continue to rely upon this declaration as evidence of my fitness and ability to participate.

3. **Medical Treatment:** I consent and authorise SBC to administer or obtain medical assistance in the event of an accident or medical condition I may suffer whilst participating in SBC boot camp and agree to pay for any costs or expenses incurred by SBC in administering or obtaining such medical assistance.

4. **Exclusion of Liability:** To the extent permitted by law and while all reasonable care is taken, SBC and its Representatives cannot be held responsible and excludes all liability however arising (including liability for negligence) for direct, indirect or consequential loss, damage, injury, cost and expenses (including without limitation loss of revenue or profits, loss of business opportunity, good will and/or data, and failure to realise anticipated savings or benefits).

5. **Release and Indemnity:** To the extent permitted by law, I release and indemnify, and will keep indemnified, SBC and all their Representatives in relation to all claims which I now, or at any time in the future may have against SBC, arising my participation in SBC Boot Camp/ Personal Training/ Aqua Aerobics

6. **Privacy:** I understand that the information I have provided is necessary for my participation in any SBC I acknowledge and agree that the information will only be used by SBC to facilitate the conduct of SBC.

7. **Photographs and right to use:** Photos or video may be taken and used by SBC for promotional or educational purposes, SBC has all rights for publishing

8. **I have provided the information required and signed the form.** I warrant that all information provided is true and correct. **I have read, understood, acknowledge and agree** to the above declaration including the warning, exclusion of liability, release and indemnity.

11. **Staceys Bootcamp recommends that you consult you GP before starting any exercise program**

Signature:

Name:

Date:

Consent

Where the applicant is under 18 years of age this Agreement must also be signed by the applicant's parent or legal guardian.

I,, am the parent or guardian of

[Applicant]. I expressly agree to be responsible for the applicant's behaviour and confirm that I have read and agree to personally accept the terms and conditions set out in this Agreement including the provision by me of a release and indemnity in the terms set out above.

Signature (Guardian):.....

Name (Guardian):

Date:

Personal and Medical Information

Surname: _____
Given Names: _____ Date of Birth: _____
Address: _____
Home Phone: _____ Work _____
Mobile Phone: _____ Email: _____
Occupation: _____
Emergency Contact Details / Next of Kin:
Name: _____ MOB: _____

Medical Questionnaire:

Do you have / have you had any of the following conditions?

High Blood Pressure, Low Blood Pressure, Heart Problems, Chest Pain, Asthma, Arthritis, Diabetes 1-2, Dizziness or Faint Spells, Epilepsy, High Cholesterol, Osteoporosis, are you breast feeding? Do you smoke?

Are You Pregnant? If yes what trimester? Have you had a C-section? If yes how long ago?

Do You Have Any Bone or Joint Conditions that May Be Made Worse / Aggravated by Exercise?

Do You Have Any Other Medical Conditions that I Should Know About?

Are you taking any medications? If "Yes" please list:

Do you have or have you had any injuries? If yes What?

Health and Fitness Goals: Please Circle

Lose Weight, Inches, Increase Muscle Tone, Build Muscle, Relieve Stress,
Improved Nutrition, Fitness, Motivation, Self Confidence

I Would Rate My Current Health and Fitness to Be:

1= Poor 10= Excellent 1 2 3 4 5 6 7 8 9 10 (Please Circle)

Are You Currently Exercising? If "Yes" please describe:

On a Scale of 1 to 10, How Important is It for You to Achieve Your Health and Fitness Goals?

1=Not Important 10=Very Important 1 2 3 4 5 6 7 8 9 10 (Please Circle)

What do you want to achieve by participating in Staceys boot camp?

Do you need help with nutrition? Yes/ No Please circle