

# Too young to join a gym?



13 to 15 year olds can now use the gym by joining our NEW safe and effective

# Club 1315

ONLY  
**£3.90**  
per session\*

Fitness instructor supervised sessions

between 10:30 to 17:00, Monday to Friday, and 14:00 to 16:00 weekends.

\*plus £30 joining fee, including induction. See consent form for more details.



hampton pool  
[www.hamptonpool.co.uk](http://www.hamptonpool.co.uk)   

Hampton Pool is managed on behalf of Hampton Pool Trust by YMCA London South West. Both are registered charities.

hampton  
pool trust  
**YMCA**

# yes please! I would like to join Club 1315 at Hampton Pool

- a one-off joining fee of £30 is required that includes an induction into the gym and all the equipment.
- you may then use the gym for only £3.90 per session, 10:30 to 17:00, Monday to Friday, 14:00 to 16:00 weekends.
- there are regular programme updates – please enquire at reception.

## Please read these terms & conditions carefully

- Club 1315 members use the gym between 10:30 and 17:00 on Monday to Friday, 14:00 to 16:00 weekends.
- All members must have an induction before using the facilities.
- No entry to the gym without a membership card (there is a £5 replacement fee for lost cards).
- Gym staff reserve the right to refuse admission or to ask a member to leave if they believe there is misuse.
- No black soled shoes or denim to be worn in the gym.
- Equipment should be replaced after use.
- All payments are non-refundable.

In order to join Club 1315 we require the parental consent form below to be completed and signed.

## Application form

Name			
Main telephone		Date of birth	
Address			
		Postcode	
email			

## Parental consent

Hampton Pool and YMCA LSW cannot accept responsibility for any loss or damage incurred whilst using the facilities. I consent to the above joining Club 1315.

Name		Relationship	
Signature		Date	

## Emergency contact details

Contact name		Main telephone	
relationship		other telephone	

Address if different from above

Address			
		Postcode	



hampton pool  
www.hamptonpool.co.uk   

Hampton Pool is managed on behalf of Hampton Pool Trust by YMCA London South West. Both are registered charities.

hampton pool trust  
**YMCA**

## Consent to exercise

- Exercising is an essential part of maintaining a healthy lifestyle. Some people however are unable to participate fully due to illness or other medically restrictive reasons. It is therefore important that the following questions are answered fully and honestly to enable us to ensure that our members can exercise safely.
- Please ensure that you sign the declaration below.
- If you are under 18 a parent or guardian must also sign.
- If you are unable to sign for any other reason, a nominated responsible person may do so on your behalf

### Physical Activity Readiness Questionnaire (PARQ) Please tick as appropriate

	Yes	No
Have you, for any reason, been unable to exercise in the past?	<input type="checkbox"/>	<input type="checkbox"/>
Has your physician ever advised you against exercising?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever suffered from any cardiac (heart) related illness?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever suffered from respiratory difficulties?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever suffered from fainting, migraines or loss of balance?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever suffered from any bone, joint or muscle related disease?	<input type="checkbox"/>	<input type="checkbox"/>
Is there any history of heart disease in your family?	<input type="checkbox"/>	<input type="checkbox"/>
Have you experienced chest pain whilst exercising?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have high blood pressure?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have elevated cholesterol levels?	<input type="checkbox"/>	<input type="checkbox"/>
Are you currently taking prescribed medication?	<input type="checkbox"/>	<input type="checkbox"/>

- If you answered 'Yes' to any of the above, please give details below. All information is held in strictest confidence and accessible only by the gym manager and relevant staff.

## Your doctor's details

Doctor's name	<input type="text"/>	Surgery telephone	<input type="text"/>
Surgery name	<input type="text"/>		
Surgery address	<input type="text"/>		

## Declaration of consent to exercise

I confirm that all the answers above are true to the best of my knowledge and I believe I am able to participate in exercise at Hampton Pool Poolside Fitness.

Signature	<input type="text"/>	Date	<input type="text"/>
-----------	----------------------	------	----------------------

The person making this application is under 18 or unable to sign themselves. Therefore I confirm that I will be taking responsibility for this person's declaration.

Name	<input type="text"/>	Relationship	<input type="text"/>
Signature	<input type="text"/>	Date	<input type="text"/>