

Too young to join a gym?



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

Club 1415

ONLY
£4.00
per session*

Fitness instructor supervised sessions
between 10:30 to 17:30, Monday to Friday, and 10:00 to 16:00 weekends.

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



hampton pool
www.hamptonpool.co.uk   

Hampton Pool is managed on
behalf of Hampton Pool Trust
by YMCA St Paul's Group.
Both are registered charities.

hampton
pool trust
YMCA

yes please! I would like to join Club 1415 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 £4.00 per session, 10:30 to 17:30, Monday to Friday, 10:00 to 16:00 weekend.
- there are regular programme updates – please enquire at reception.

In order to join Club 1415 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 St Paul's Group cannot accept responsibility for any loss or damage incurred whilst using the facilities. I consent to the above joining Club 1415.

| | | | |
|-----------|--|--------------|--|
| Name | | Relationship | |
| Signature | | Date | |

Emergency contact details

| | | | |
|--------------|--|-----------------|--|
| Contact name | | Main telephone | |
| relationship | | other telephone | |

Address if different from above

| | | | |
|---------|--|----------|--|
| Address | | | |
| | | Postcode | |

Terms & conditions *please read carefully before signing*

- Club 1415 member application forms must be signed by a parent on site. If this is not possible, a phone call to attain parental consent is permitted.
- Membership cards are to be handed into reception for admittance. Without your membership card, you will be unable to use the gym and will be required to pay the normal rate for classes or swimming.
- If a card is lost, a replacement will be made on receipt of £5 to cover our administrative costs.
- Payments are non-refundable.

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- Club 1415 members may use the gym between 10:30-17:30 Monday to Friday and 10:00-16:00 at the weekend.
- Last entry: Monday to Friday 17:00; weekend 15:30.
- The gym is for the use of Hampton Pool Poolside Fitness members only, therefore guests are not allowed.
- During busy periods please limit your time on popular equipment such as the treadmills.
- For reasons of health and safety, members must adhere strictly to the following:

- All Club 1415 members must have completed a full gym induction and *Get Started* exercise program, be signed off as competent by a fitness Instructor and complete 2 supervised workouts before using the facilities.
- Club 1415 members may not use the gym in a group of more than three people.
- 14-15 year olds are not to use free weights until specifically taught during induction, *Get Started* or optional safe lifting classes.
- 14-15 year olds should not exceed recommended weight provided by trainer/instructor during the induction/*Get Started*, without first consulting with an Instructor.
- All free weights are to be returned to their racks after use.
- All other equipment is to be returned tidily to the appropriate stowage in the gym and studio.
- Please leave the facilities the way you find them.
- Cups and mugs are not allowed in the gym or studio.
- Members should bring a small towel to wipe down machinery after use.
- Tracksuits or shorts and t-shirts must be worn at all times.
- Suitable footwear* should be worn at all times, unless otherwise informed by an instructor (i.e. yoga)
- No denim to be worn in the gym.
- The gym is closed between 09:30-10:30 for circuits.
- Offensive language or behaviour will not be tolerated.
- Clashing weights, excessive noises and mistreatment of equipment will not be tolerated.
- Chewing gum and mobile phones are not permitted in the gym.
- Anyone thought to be under the influence of alcohol or drugs will be ejected and their membership will be reviewed.
- Hampton Pool Poolside Fitness management reserve the right to exclude any member they deem not to be adhering to any of the above or who by their actions poses a health and safety risk to others.

**no black soles on footwear*

Gym staff reserve the right to refuse admission, ask a member to leave or terminate a membership if there are complaints or concerns regarding misuse of facility or inappropriate behaviour.

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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"/> |

