



MEMBERSHIP APPLICATION FORM

MEMBERSHIP APPLICATION

I wish to apply for membership of The Health Club at The Kingsley, Cork. I understand that all applications for admission to membership of The Health Club shall be made strictly to the Rules of The Health Club. Payment of membership subscription and completion of the application shall constitute an agreement.

MEMBERSHIP TYPE		
Single: Gold:	Couple: Platinum:	
Family: Corporate:	Transfer: Renewal: Over 55:]
Family. Corporate.	Transier. Nenewai. Over 55.	
PERSONAL DETAILS Membership Number:		
Mr.: Mrs.: Ms.: (please tick)		
First Name:	Date of Birth: Company Name:	
Surname:	Home Number:	
Address:	Mobile: Work Phone:	
	Email: Work Email:	
How did you hear about The Health Club at the Kingsley?		
FUTURE CONTACT AND PROMOTIONS I give permission to be contacted in relation to my membership, bookings, etc. as a member of The Health Club at The Kingsley Would you like to be contacted for further promotions from The Fota Collection? Please tick to opt in Email: Phone Number:		
FITNESS EVALUATION REPORT		
FITNESS EVALUATION REPORT History/Family History of Heart Di	sease Yes No 2-3 Stone Overweight	Yes No
History/Family History of Heart Di High/Low Blood Pressure	Yes No Back Or Joint Problems	Yes No
History/Family History of Heart Di High/Low Blood Pressure Recent Surgery	Yes No Back Or Joint Problems Yes No Do You Suffer From Fainting/Blackouts	Yes No Yes No
History/Family History of Heart Di High/Low Blood Pressure Recent Surgery Pregnant/In Last 3 Months	Yes No Back Or Joint Problems Yes No Do You Suffer From Fainting/Blackouts Yes No Taking Any Medication	Yes No Yes No Yes No
History/Family History of Heart Di High/Low Blood Pressure Recent Surgery Pregnant/In Last 3 Months Respiratory Disorders/Asthma	YesNoBack Or Joint ProblemsYesNoDo You Suffer From Fainting/BlackoutsYesNoTaking Any MedicationYesNoAny Other Illness Or Injury	Yes No Yes No
History/Family History of Heart Di High/Low Blood Pressure Recent Surgery Pregnant/In Last 3 Months Respiratory Disorders/Asthma Do You Smoke	YesNoBack Or Joint ProblemsYesNoDo You Suffer From Fainting/BlackoutsYesNoTaking Any MedicationYesNoAny Other Illness Or InjuryYesNoPlease Specify:	Yes No Yes No Yes No
History/Family History of Heart Di High/Low Blood Pressure Recent Surgery Pregnant/In Last 3 Months Respiratory Disorders/Asthma Do You Smoke Male Over 40 yrs	Yes No Back Or Joint Problems Yes No Do You Suffer From Fainting/Blackouts Yes No Taking Any Medication Yes No Any Other Illness Or Injury Yes No Please Specify: Yes No Image: Specify:	Yes No Yes No Yes No
History/Family History of Heart Di High/Low Blood Pressure Recent Surgery Pregnant/In Last 3 Months Respiratory Disorders/Asthma Do You Smoke Male Over 40 yrs Female Over 40 yrs If you answer "Yes" to any of the above, a G responsibility for their personal, medical and gym equipment. Any assessment undertaken be relied on by members as certifying their fi	YesNoBack Or Joint ProblemsYesNoDo You Suffer From Fainting/BlackoutsYesNoTaking Any MedicationYesNoAny Other Illness Or InjuryYesNoPlease Specify:	Yes No Yes No Yes No Yes No Yes No to accept the use of the e and should not
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TERMS AND CONDITIONS

1. Membership of The Health Club at The Kingsley and use of its' facilities, is strictly reserved for the named applicant. 2. As a member you agree to comply with rules of membership which are displayed prominently in The Health Club and relate to opening hours, use of the facilities and your conduct. We may make reasonable changes to these rules at any time provided we give you advance notice of the changes. 3. The Health Clubs fitness evaluation must be completed and signed by all applicants in advance of using the facilities. 4. Members should take reasonable care that their personal property is stored safely in the lockers provided for this purpose. Our liability to compensate you (in the case of loss or damage other than death or personal injury) is limited to a reasonable amount having regard to such factors as whether the damage was due to a negligent act or omission by us. 5. Proper clothing and footwear must be worn at all times and members are required to carry a towel to wipe down equipment after use. Swimwear must be worn in the pool area at all times. 6. Under 16 years are not permitted to use the sauna, steam room, spa pool or gym. 7. You may terminate this agreement on 30 days notice in writing if you are unable to use The Health Club through serious illness or injury likely to preclude you from using The Health Club for a period of at least 2 calendar months. (We will request reasonable evidence of your illness or injury - e.g. a doctors' certificate). 8. You may also terminate this agreement if: a) We significantly reduce the facilities or opening hours of The Health Club; b) We change the location of The Health Club; c) We close The Health Club for refurbishment for a period of more than 4 weeks at a time. We will use our reasonable endeavours to give you at least 45 days notice of the change (either in writing or by prominently displaying a sign in The Health Club) and, if you wish to terminate your membership due to reasons stated above, you can give us 30 days, notice in writing to terminate. If you terminate your membership (in accordance with terms stated above) we will refund any part of your membership fee which you have paid in advance that relates to a period after termination. 9. We may terminate this agreement in the following circumstances: a) If you commit a serious or repeated breach of this agreement or the dubs rules of membership and the breach, if capable of remedy, is not remedied within 7 days of receipt of a default notice; b) If any part of your membership fee remains unpaid 30 days after its due date for payment or c) If you provide us with details which you know to be false when applying for membership and the false declaration would have reasonably affected our decision to grant you membership. If we terminate fur any of these reasons, we reserve the right to retain the money paid under this agreement, to cover any costs incurred. 10. If we terminate your membership for any serious reason we reserve the right to retain a proportion of the money which you have paid us under this agreement to cover any reasonable costs we have incurred as a result. 11. Children under the age of 16 years must be accompanied by an adult member and or guest at all times. Children under 5 years are allowed use of the swimming pool free of charge. 12. Renewal at the current Health Club fee rate "Will be available to all customers rejoining prior to expiration of the membership. 13. The Health Club may withdraw use of all or part of The Health Club for the purpose of undertaking maintenance work or any other work considered necessary for a maximum period of ten working days. Beyond that period, if requested, a

proportionate refund of the annual subscription can be made. 14. Members who do not wish to accept any increase in subscription may cancel their membership by giving written notice. The member giving notice must continue to pay subscriptions at the rate current immediately prior to any proposed increase until the end of such notice period. The Health Club will refund any subscriptions that have been paid by a member for any period after the expiry of the notice. 15. It is the intention of The Health Club that all terms of a financial contract between the customer and dub are contained in this document. 16. In the event of breach of membership rules and regulations, The Health Club reserves the right of admission and may reserve the right to require any member or guest to leave the premises. 17. Please note on couple or family memberships the primary member will receive correspondence. 18. Shaving and use of oils are not permitted within the pool area. Shaving is only permitted within the ladies and gents changing areas. 19. Should you agree to a Direct Debit membership option, the payment of the 1st and 12th month installments shall be paid to activate such membership. You can terminate this agreement with 30 days written notice and The Health Club reserves the right to retain a proportion of the money which you have paid us (usually the 12th month payment) under this agreement to cover any reasonable costs we have incurred as a result. 20. Any complaints concerning The Health Club or dispute or ambiguity about the interpretation of these conditions of membership and rules shall be referred to the management of The Health Club whose decision will be final.

ESSENTIAL INFORMATION

FOR HEALTH CLUB USERS

By using the facilities of The Health Club at The Kingsley, it is most important you do the following:

- You must fully comply with the rules of The Health Club.You must ensure you are fit to undertake the activity you are participating in.
- You have taken all relevant medical and professional advice to ensure your safety, to verify your fitness and to confirm your suitability for membership.
- You will seek instruction, from a member of The Health Club's fitness team, so as to make you competent in the activity you are undertaking (including the use of all relevant equipment).
- You will take reasonable precautions to ensure the safety of yourself and others.
- You will immediately inform the dub of any accident or incident that occurs.
- Members wishing to report on problems with services at The Health Club should contact The Health Club Manager (simply ask at reception).

Applicants Signature:

Block Capitals:

- Informed of freeze policy
- Informed of cancellation policy
- Informed about student/corporate id policy
- Informed of Direct Debit policy

FOTA Collection

