



## Parental Consent

### For Fitness Centre Use by 13-17 year olds

| PERSONAL INFORMATION |                              |                     |
|----------------------|------------------------------|---------------------|
| <b>Last Name:</b>    | <b>First Name:</b>           |                     |
| <b>Address:</b>      |                              | <b>Postal Code:</b> |
| <b>Phone No.:</b>    | <b>Birthdate (dd/mm/yy):</b> | <b>Age:</b>         |
| PARENT or GUARDIAN   |                              |                     |
| <b>Last Name:</b>    | <b>First Name:</b>           |                     |
| <b>Business No.:</b> | <b>Cell Phone No.:</b>       | <b>E-Mail:</b>      |

Please complete the attached PAR Q+ (The Physical Activity Readiness Questionnaire). If you answer 'YES' to one or more of the 7 questions, please proceed to page 2 & 3 of the PAR Q+. You may require a doctor's clearance for exercise before your orientation.

1. Do you have previous experience strength training?  Yes  No

If yes, from where or with whom? (e.g. Sport Coach, School, Personal Trainer, etc.)

---



---

*Please describe your previous and/or current strength training program to the Fitness Attendant.*

2. What are your goals for this orientation:

---

3. What are your physical fitness goals?

---

You may be asked to demonstrate some of the exercises you learn in the orientation to ensure you have proper technique and a good understanding of the fitness principles and goals of your program.

| PARENTAL CONSENT FORM   |                              |
|---|------------------------------|
| The City of Richmond (the "City") and its Affiliated Community Associations* (see reverse)  |                              |
| <b>Name of Child:</b>   | <b>Birthdate (dd/mm/yy):</b> |
| <p>I consent to my child's participation in the use of the Fitness Centre. I am aware that there are risks associated with participation in the Fitness Centre, including the risk of injury, and I consent to my child's participation in spite of such risks. I acknowledge that it is my responsibility to advise the City of any medical or other conditions that may affect my child's participation in the Fitness Centre.</p> <p>In the event that my child requires medical attention, I consent to my child being transported to the nearest emergency centre, including by ambulance if necessary, and accept that I am responsible for any costs of such ambulance service.</p> <p>I have read this Parental Consent Form and understand and accept its terms.</p> |                              |
| <b>Parent/Guardian Signature:</b>   |                              |
| <b>Name (please print):</b>   | <b>Date:</b>                 |

| OFFICE USE – ORIENTATION COMPLETED  |                          |
|-------------------------------------|--------------------------|
| <b>Date (dd/mm/yy):</b>             | <b>Trainer Initials:</b> |
| <b>Entered in Class (dd/mm/yy):</b> | <b>Clerk Initials:</b>   |

## Fitness Centre Etiquette

- **RESPECT OTHER USERS:** Groups of no more than 2/3 are allowed to be at one weight or cardio machine at a time.
- **ACT IN A MATURE MANNER:** No tolerance is given to foul language and inappropriate behaviour.
- **WEAR FITNESS CLOTHING AND SHOES:** Appropriate apparel and closed-toed athletic shoes are required.
- **KEEP THE CENTRE CLEAN:** Wipe down machines and benches and return weights and equipment to their proper place following use.
- **SHARE THE SPACE:** Please allow others to 'work in' with you if you are in between sets.
- **TREAT THE EQUIPMENT PROPERLY:** Avoid slamming and intentionally dropping weights.
- **GET TO KNOW THE CENTRE:** Familiarize yourself with the centre's specific guidelines (such as time allotted on cardio machines and storage of bags and small valuables).

### Other facility specific guidelines:

---

---

## Etiquette Agreement

I, \_\_\_\_\_, understand and accept the responsibilities and agree to abide the fitness policies specific to the Centre I visit. I am aware that the fitness staff, and/or volunteers have the right to decide my eligibility to use the weight and cardio room as part of this agreement.

1. I will act in a manner that respects my fellow fitness patrons
2. I will follow the centre's fitness etiquette and guidelines

Name (print): \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Trainer Name: \_\_\_\_\_



### \*Community Associations:

