

Training Station Membership Agreement

Member Information

Name: _____

Address: _____

E-mail: _____

Membership number: _____ (same as your phone#)

Emergency contact name & phone: _____

Payment Information

1. MEMBERSHIP COSTS

Enrollment fee: _____ per household **Notes:** _____

Monthly Dues: _____ **Notes:** _____

Billing date: _____

2. METHOD OF PAYMENT

CREDIT DEBIT CARD Visa/Master Card/Amex/Discover/Diners/JCB/Other

Card number: _____ (Please print legibly.)

Expiration date: _____ Security Code: _____ Signature: _____

CHECK

Account: Checking/Savings

Routing number: _____

Account number: _____

Signature: _____

My signature above authorizes The Training Station to debit my account as indicated above until such time as I provide it with an emailed termination notice. Upon receipt of an emailed termination notice, The Training Station will cancel my membership, within three business days. The Training Station will not be responsible for any fees or charges incurred as a result of my cancellation.

My signature below indicates that I have read this entire membership agreement, and that the staff has answered all of my questions to my satisfaction. I know that my membership dues are subject to change, and that The Training Station will promptly notify me of any changes to my dues. By signing below, I agree to be bound by the rules and regulations of The Training Station.

Member Signature: _____ Date: _____

RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

IN CONSIDERATION of being permitted to enter Training Station, LLC at 533 Spring Garden St Unit D, Philadelphia, PA 19123, for any purpose, the undersigned, for himself or herself and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has inspected its premises, facilities, and equipment and found them to be safe and reasonably suited for his or her intended purposes.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE TRAINING STATION, LLC FOR ANY PURPOSE, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1. THE UNDERSIGNED HEREBY RELEASES DISCHARGES AND COVENANTS NOT TO SUE TRAINING STATION, LLC, or any of their directors, share holders, partners, officers, employees, or agents ("releasees") from any and all liability for any loss, injury or damage incurred on the premises, whether caused by the negligence of the releasees or otherwise.
2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY, SAVE AND HOLD HARMLESS the releasees from any loss, injury or damage they may incur due to the presence of the undersigned at Training Station, LLC, whether caused by the negligence of the releasees or otherwise.
3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE due to the negligence of releasees or otherwise while on Training Station, LLC premises.

THE UNDERSIGNED agrees that the foregoing RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT is governed by the laws of the Commonwealth of Pennsylvania and that, if any portion of this Agreement is determined to be invalid, the balance of the Agreement will continue in full force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements or inducement apart from the foregoing written agreement have been made.

I HAVE READ, AND ACCEPT, THE TERMS OF THIS AGREEMENT:

Signature of Applicant _____ Date _____

Printed Name: _____

PRE-ACTIVITY SCREENING

Name: _____

Regular physical activity is enjoyable, safe, and healthy for most people. However, some people may have health-related risks that can be aggravated by participation in a physical activity program. As a result, it may be necessary for you to check with your physician before embarking on a physical activity program. To help determine if you should see your physician before beginning a physical activity program, please answer the following questions carefully. All information will be kept strictly confidential.

PRE-ACTIVITY SCREENING QUESTIONS

Yes **No**

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Has your physician ever told you that you have a heart condition? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you experience pain in your chest when you are physically active? |
| <input type="checkbox"/> | <input type="checkbox"/> | In the past month, have you experienced chest pain when not performing physical activity? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you lose balance because of dizziness or do you ever lose consciousness? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you have a bone or joint problem that could be aggravated by a change in your level of physical activity? |
| <input type="checkbox"/> | <input type="checkbox"/> | Is your physician currently prescribing medications for your blood pressure or a heart condition? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you know of any other reason why you should not participate in a physical activity program? |

If you answered "yes" to any of the questions above, it is recommended that you consult with your physician, by phone or in person, before having a fitness test or participating in a physical activity program.

Signature _____ **Date:** _____

Rules of The Training Station

- **Sign in.**
- **Lower weights so that they land softly—unless you are lifting on the platforms. Do not pick it up if you cannot put it down.**
- **Complete all required membership and information forms.**
- **Non-staff members cannot train clients.** A client is any person that pays money or barter in exchange for exercise instruction.
- **Wash your hands before using any equipment and after using the toilet.** The best protection against harmful bacteria is good hygiene. In the Training Station, no hygiene is more important than hand hygiene. And good hand hygiene means washing your hands with soap and water or an alcohol-based hand sanitizer. Members must wash their hands after using the toilet.
- **Wipe the equipment.** Wiping the equipment that contacts the skin, or that is sweated upon, will help prevent infection by harmful bacteria like MRSA. Wiping barbells, dumbbells, and plates will not be necessary- assuming that you washed your hands before touching equipment and after using the toilet.
- **Follow the staff's instructions regarding the use of equipment.** The Training Station's goal is to provide a great workout for its members on the best equipment available. To attain this goal, the staff may occasionally need to assign members to particular pieces of equipment, correct the way a member is using the equipment, or limit the amount of time a member may use equipment. When these situations occur, the staff will consider the member's exercise objectives before giving any instructions.
- **Wear an appropriate outfit.** The appropriate outfit will include, at least, a top, a bottom, and athletic footwear. The member's personal taste will determine things like fit and color and style. But bear in mind that the more skin that is exposed, the greater the chance for getting a bacterial infection of the skin.
- **For temporary storage, use the lockers.** These lockers can hold your keys, wallets, bag, and other small possessions. Be sure to put a lock on the locker. Take your possessions with you when you leave the gym. Each night after closing, we will cut off every lock on the lockers that are not being rented. Please rent a locker if you need long-term storage.
- **No gym bags on the workout floor.** Because there is not much unoccupied floor, gym bags on the floor are a hazard. Leave your gym bag at the reception area or in your locker, just not on the floor.
- **Put weights and bars back in their proper place after use.**

My signature below indicates that I have read all of the above-listed rules of The Training Station, and that the staff has answered all of my questions about these rules to my satisfaction. By signing below, I fully accept responsibility for my actions as a member of the club.

Member Signature: _____

Date: _____