GET FIT
FINTECH CAMPUS GYM

GETFIT APPLICATION FORM

PERSONAL DETAILS

Title
First names
Surname
ID Number

Phone Number
Email Address
Gender ☐ Male ☐ Female

Emergency Contact Name:
Emergency Contact Number:

Physician's Name (Optional):
Physician's Contact Number (Optional):

MEMBERSHIP

☐ External Membership @ R385.00 per month
☐ Student / Internal I Membership @ R335.00 per month

PAYMENT

☐ Card
☐ Card ☐ Account - Employees Only

If Student membership is selected, please complete:

Proof of registration or a valid student card is required.
Student status must be updated annually.
Failure to provide above will result in standard membership rate being charged

University/Institution:
Student Status Valid Until:

DECLARATION

I confirm that the personal information above is true and accurate.
PLEASE NOTE: ALL fields in this section above are required, except where marked 'Optional'.

MEDICAL HISTORY

	Y	N		Y	N
History of heart disease, chest pain, or stroke?	☐	☐	Muscle, joint, back, neck disorder, or any previous injury that may affect exercise?	☐	☐
High blood pressure?	☐	☐	Diabetes or thyroid condition?	☐	☐
Any chronic illness or medical condition?	☐	☐	Do you smoke or use tobacco products?	☐	☐
Difficulty with physical exercise?	☐	☐	Obesity (BMI greater than 30)?	☐	☐
Has a doctor advised you not to exercise?	☐	☐	Any hernia or condition aggravated by lifting weights or exercise?	☐	☐
Surgery within the last 12 months?	☐	☐	High cholesterol?	☐	☐
Pregnant (currently or within the last 3 months)?	☐	☐	Has a healthcare professional recommended supervised exercise?	☐	☐
History of breathing or lung problems?	☐	☐	Unexplained weight loss or loss of appetite?	☐	☐
Are you taking any medication or drugs?	☐	☐	Any other medical condition not listed above?	☐	☐
Faintness, dizziness, or frequent headaches?	☐	☐	Any other reason you should not participate in exercise?	☐	☐

If you answered 'YES' to any of the above, please provide details:

MEDICAL DECLARATION

I declare that the information provided in this Medical History Questionnaire is true and complete to the best of my knowledge.
I understand that it is my responsibility to inform the gym of any changes to my medical condition that may affect my ability to exercise safely.
If I answered YES to any of the above questions, I acknowledge that I should obtain medical advice before participating in an exercise programme and follow any advice or restrictions provided by my healthcare professional.
This Medical History Questionnaire forms part of the Gym Membership Agreement. By signing the declaration, Waiver, and Terms & Conditions on the back page, you confirm that the information provided in this questionnaire is true and complete.

GENERAL TERMS & CONDITIONS

- These Terms & Conditions form part of your Gym Membership Agreement and are intended to ensure the safety, security, and enjoyment of all members.
- Failure to comply with these Terms & Conditions may result in the suspension or termination of your membership.

TERMS & CONDITIONS

- Exercise at your own risk.
- Ensure that you are medically fit before exercising.
- Consult a medical practitioner if you have any health concerns.
- Inform management of any changes to your medical condition.
- Stop exercising immediately and notify staff if you experience chest pain,
- dizziness, severe pain, shortness of breath or any unusual symptoms.

GENERAL GYM USE

- Treat all members, staff and equipment with respect.
- No smoking, vaping, alcohol or illegal drugs.
- No selling, marketing or advertising without management approval.
- Pets are not permitted, except registered guide dogs.
- Firearms are prohibited unless carried by authorised law enforcement
- officials acting in their official capacity.

ACCESS CONTROL

- Members must sign in before using the gym.
- Membership is strictly personal and non-transferable.
- Members may not allow non-members access using their membership.

GUESTS

- Guests may only use the gym with a payment of the applicable Day-Pass (guest fee).
- Members are responsible for the conduct of their guests.

MEMBER BEHAVIOUR

Members must:

- Treat everyone with respect.
- Follow staff instructions.
- Re-rack all weights after use.
- Wipe equipment after use.
- Return equipment to its correct place.
- The following behaviour is prohibited:Harassment, Bullying ,violence, intimidation, discrimination, theft, damage to equipment, offensive/abusive language or any behaviour that places others at risk.

WHAT TO WEAR

Members must wear:

- Closed training shoes.
- Appropriate exercise clothing.

Not permitted:

- Bare feet.
- Bare chest unless authorised.
- Clothing that may damage equipment or compromise safety.

PARKING

- All vehicles are parked entirely at the owner's risk.
- The gym accepts no responsibility for loss, theft or damage to vehicles or their contents.

LOCKERS & PERSONAL BELONGINGS

- Lockers are free of charge and available for daily use only.
- Overnight items may be removed by management.
- The gym accepts no responsibility for lost, stolen or damaged personal belongings.
- Lockers may be opened by management when necessary.

BOXING AREA

- Use boxing equipment responsibly.
- Return equipment after use.
- Hand wraps and gloves are recommended when boxing.

PERSONAL TRAINING

- Only Personal Trainers authorised by the gym may conduct training sessions within the facility unless prior written approval has been granted by management.

EQUIPMENT & TRAINING FLOOR

Members must:

- Use equipment correctly & follow all safety instructions.
- Ask staff for assistance if unsure.
- Report damaged equipment immediately.
- Return equipment after use.
- Use a towel while exercising.
- Bring only sealed water bottles onto the training floor.

The following are prohibited:

- Food on the training floor.
- Misuse or tampering with equipment.

SAFETY

Members must:

- Follow all health and safety notices.
- Report hazards immediately.
- Exercise with care around wet floors and maintenance areas.
- Follow all emergency procedures and staff instructions.

FEES & CHARGES

- Memberships are month-to-month. (No Contracts)
- Memberships are valid only for the current month's membership period.
- Each monthly payment period has a designated Start Date, Cut-off Date, and Expiry Date. (If unsure - ask a staff member)
- Membership fees are non-refundable and expire on the designated expiry date and do not carry over.
- Membership fees are not payable in advance.
- Outstanding balances may result in suspension of gym access.
- Membership fees may be adjusted with at least 30 days' written notice.
- Outstanding accounts/payments may be handed over for collection, and the member will be responsible for any associated legal or collection costs.

TERMINATION

- Membership may be terminated:
- By the member before the next month's payment period or with written notice.
- By the gym for breach of these Terms and Conditions.
- Immediately for misconduct, abuse, illegal activity or damage to gym property.

FINAL

- The gym reserves the right to approve or decline any membership application.

WAIVER OF LIABILITY

I acknowledge that participation in exercise and the use of the gym facilities involve inherent risks, including the risk of injury, illness, disability or death. I voluntarily participate in all activities and use the facilities entirely at my own risk.

To the fullest extent permitted by South African law, I release and hold harmless the gym, its owners, directors, management, employees, trainers and agents from any liability for injury, illness, death, loss or damage arising from my use of the facilities or participation in any activity, except where such loss or damage results from gross negligence or intentional misconduct.

The gym accepts no responsibility for the loss, theft or damage of personal belongings brought onto the premises.

MEMBER DECLARATION

☐ I confirm that:

The information provided in this Membership Application and Medical History Questionnaire is true and complete.
I have read, understood and agree to these Terms and Conditions.
I understand and accept the Medical Declaration and Waiver of Liability.
I agree to comply with all gym rules, policies and staff instructions.

Full Name _____

Date _____

Signature _____