



GYM MEMBERSHIP FORM

New member (please complete Sections 1, 2 & 3)Renewing member (please complete Sections 1 & 3)									
1. MEMBERSHIP DETAIL	_S								
Membership Start Date:_	_/_/_ Expiry Da					Date:/	/		
Title: Mr/Mrs/Ms/Miss	First name:					Last name:			
Membership Term:	6 months (\$280)								
(all prices include GST)	12 months (\$450)								
	1 month (\$50) – Gym & Class Access								
	Casual entry (\$9.50 per visit)								
	AFTER HOURS ACCESS (\$50 per toggle)								
2. MEMBERSHIP DETAIL	_S (Renev	ving	membe	rs com	plete	if details	have change	d)	
Sex: Male ☐ Female		D.C	D.B:	_/	/	_	Age:	years	
Postal Address:							·		
Town:							Postcode	:	
Telephone:	Home:								
	Work:								
	Mobile:								
Email:									
Do you consent to receive information from			rom G	SC via	ema	ail?	YES/	NO	
Emergency Contact Name:									
Emergency Contact Phone:									
Have you used a gym before?							YES/	YES / NO	
3. ACKNOWLEDGEMENT									
I have read and agree to abide by the terms and conditions of membership listed on the reverse of this form:									
Member signature:				Guardian siç			gnature: (where applicable)		
OFFICE USE ONLY - Se	e overpa	ge							
Fees Received \$			Date	Date//			Receipt N	Receipt No:	
GymMaster Login Provided Y/ N			Арр	App Downloaded: Y/N			Induction	Induction to sign in to Ap Date:	
Keyless Entry: Y / N			Togg	Toggle Number:			Induc. To	Induc. To Gym Date:	
Pre Exercise Asses Completed: Y/N									

Responsible Officer	Director Comr	Director Community Services				
Date Created:	December 202	December 2019		1.0		
Review Date	Version	Comme	Comments			
07/09/2021	1.2					

OFFICE USE ONLY						
Details accepted and understood: Signed:		Date:				
Entered in Gym Master? Y / N Date:						
Sent to records: Signed:	_ Date:					