



Date: _____

PERSONAL INFORMATION

First Name: _____ Surname: _____

Gender: _____ Date of Birth: _____ Age: _____

Residential Address: _____

_____ Postal Code: _____

Telephone: _____ (H) _____ (W)

_____ (Cell)

Email Address: _____

IN CASE OF AN EMERGENCY:

Next of Kin:

Name: _____ Contact Number: _____

Current Doctor:

Name: _____ Contact Number: _____

HEALTH RISK FACTORS

History:	Yes/No
Have you ever been diagnosed with a heart condition?	
Do you currently have a heart condition?	
Symptoms:	
So you experience chest discomfort with exertion?	
Do you experience unreasonable breathlessness?	
Do you experience dizziness, fainting or blackouts?	
Other health issues:	
Do you have any ailments/ or disabilities at the moment?	
Are you diabetic? If yes state whether insulin or non-insulin:	
Do you have asthma or other lung disease?	
Do you have burning or cramping sensation in your lower legs when walking a short distance?	
Do you have musculoskeletal problems that limit your physical activity (muscle, ligament, bone)?	
Are you on any medications (prescription or not)? Which ones?	
Do you have any allergies?	
Do you have any current injuries?	
Do you have any past injuries?	
Are you pregnant?	
<i>NOTE: If you answered "YES" to <u>any</u> of these statements in this section, you should consult your physician or health care provider before engaging in exercise.</i>	

Cardiovascular Risk Factors:	Yes/No
Are you a woman older than 55 years old, have you had a hysterectomy, or are postmenopausal?	
Do you smoke, or have you quit smoking within the previous 6 months? How many cigarettes a day?	
Is your blood pressure >120/80 mm HG? If yes, do you take blood pressure meds?	
Is your cholesterol level >5.2 mmol/L? If yes, do you take medication for it?	
Do you have a close blood relative who had a heart attack or heart surgery before age 55 (father/brother) or age 65 (mother/sister)?	
Are you physically inactive (i.e you get <30mins of physical activity on at least 3 days per week)?	
Are you > 10 kgs overweight?	
<i>NOTE: If you answered "YES" to <u>two or more</u> of the questions in this section, you should consult your physician or health care provider before engaging in exercise.</i>	

INDEMNITY

1. I understand that I should consult a physician before beginning any exercise programme and that should I feel lightheaded, faint, dizzy, nauseated, or experience pain or discomfort, I am to stop the activity and inform my Personal Trainer.

2. I acknowledge being informed of any possible physical and emotional side effects including but not limited to abnormal blood pressure, fainting, heart attack or even death. I assume all risk for my health and wellbeing and hold no accountability against The Fitness Factory and any of its staff/trainers, during and after the programme and assessment procedures.

3. I accept that Personal Training/Group Training fees are billed on a pre-pay basis. The full month's payment is to be made before the 1st of each month. All training sessions are non-transferable and non-refundable, and should I decide not to finish a month for any reason whatsoever, no payment reimbursement will be granted.

4. I accept that no sessions will be carried over to the following month, any missed sessions can be made up during the month.

5. I accept that no time adjustments will be made for late arrivals unless a suitable arrangement has been made. If I, as the client, am late, the session will only last until the end of the hour that it was scheduled.

6. And most importantly, I understand that The Fitness Factory cannot guarantee my results and is unable to monitor me on a 24 hours basis, or control how many chocolates I eat after gym! ;-)
Therefore I understand that my progress depends on my own effort and cooperation in and outside of the sessions.

7. By signing this document, I acknowledge that I have voluntarily chosen to participate in this Personal Training/Group Training, and confirm that I have read this document and fully understand it.

Clients Name

Date (D/M/Y)

Clients Signature

For any further enquiries, please contact:

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www.thefitnessfactory.co.za