



Cumann Luath - Chleas Gael *Muintir Chú*



Gym Use Disclaimer

Please read and answer below questions and sign at the end of the form.

Note – you must be over 18 to participate in exercise programs and use the facilities.

What regular exercise do you currently do?

Have you ever had OR do you have?

Stroke	N/Y
Heart Condition	N/Y
Diabetes	N/Y
Epilepsy	N/Y
Heart murmur	N/Y
Dizziness	N/Y
Fainting	N/Y
Palpitations or chest pains	N/Y
High or Low blood pressure	N/Y

Are you OR have you recently had or done any of the following?

Prescribed medication (If Yes, please give details)	N/Y
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Have you been hospitalised recently? (If Yes, please give details)	N/Y
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****Please Note:** If you have answered **YES** to any of the above OR you are **NOT SURE** – We will recommend that you see a Doctor prior to using the facilities and undertaking exercise activities.

Have you ever had or do you have?

Arthritis	N/Y
Asthma	N/Y
Muscular/Back/Ankle/Knee pain	N/Y
Did you or do you smoke?	N/Y

Have you had any major surgery? N/Y

(If Yes, please give details)

Statement

I recognise that the Instructor is not able to provide me with medical advise with regards to my medical fitness & that this information is used as a guideline of my ability to exercise. I have answered the questions to the best of my ability and understand the meaning of each question.

Signature: _____ **Date:** _____

Name: _____

ACKNOWLEDGEMENT RELEASE AND ASSUMPTION OF RISK

WARNING – THIS IS AN IMPORTATNT DOCUMENT THAT AFFECTS YOUR LEGAL RIGHTS AND OBLIGATIONS. READ IT CAREFULLY AND DO NOT SIGN IT UNLESS YOU ARE SATISFIED THAT YOU UNDERSTAND IT. IF YOU HAVE ANY QUESTIONS PLEASE ASK OUR REPRESENTATIVE.

RELEASE AND INDEMNITY TO THE CLUB

IN CONSIDERATION of the acceptance of my payment for participating in the activities I AGREE TO RELEASE AND INDEMNIFY the Club as follows:

- I participate in the activities at my sole risk and responsibility

I ALSO AGREE THAT in the event that I am injured or my personal property is damaged, I will bring no claim, legal or otherwise, against the Club in respect of that injury or damage.

Signature:: _____ **Date:** _____