



THE
SENIOR & COMMUNITY
CENTER AT
FOUNDERS VILLAGE
FITNESS ROOM
MEMBERSHIP PACKET



IN PARTNERSHIP WITH  **MemorialCare**

17967 BUSHARD ST. | FOUNTAIN VALLEY, CA 92708
(714) 593-4446 | FVSENIORCENTER@FOUNTAINVALLEY.ORG

POLICIES

- Workout clothes and athletic, closed toe, shoes must be worn at all times. No opened toe shoes, sandals, or dress shoes are allowed.
- Members must provide their own towels and wipe off equipment after each use. No towel, no entry.
- No food, gum, or drink, except water, is allowed in the Fitness Room. A secure closure is required on all water bottles (no open cups).
- Cell phones should be silenced or turned off while in the Fitness Room and phone calls are prohibited.
- Personal audio units must be used with head phones, so that audio is not heard.
- The City/Center is not responsible for lost, stolen or damaged personal property left in the Center.
- Unauthorized personal training or instructing is prohibited.
- Members are required to follow direction from Center Staff. Inappropriate behavior such as profanity, abusive language, rudeness, theft of property and physical contact is prohibited. Violation of Center policies may result in termination of membership.

PROCEDURES

- Hours of Operation | Monday-Friday from 8:30am-4:30pm. Hours are subject to change, please check with The Center.
- Select Membership Option.
- Complete Fitness Room Waiver and Release of Liability.
- Complete Orientation with staff member, and complete Equipment Training List.
- Clients will need to sign in at information desk prior to using the Fitness Room. At that time, volunteers/staff will verify that all necessary information is on file each time clients use the Fitness Room.
- Personal items must be stored in the cubby cabinet. For safety reasons, no items may be left on the floor near the exercise equipment.

MEMBERSHIP

- Use of the Fitness Room is limited to participants 55 years of age and older.
- Membership Options Include: Daily \$2.00 | 10 Punch \$10.00 | 20 Punch \$20.00 | Yearly \$100.00
- Prior to first use of the Fitness Room, there is a required orientation that must be completed with a staff member.
- No refunds once user has received their orientation.
- Only members of the Fitness Room may use the equipment.
- A current membership card must be presented at each visit. Membership cards are non-transferable and may not be used by others. Any unauthorized use of your card may result in termination of membership.

EQUIPMENT USE

- Orientation demonstrations on equipment take precedence over drop-in usage.
- Clients are asked to use caution with all equipment. Should you feel faint, dizzy, queasy or ill in any way, please stop exercising and contact Center Staff immediately.
- Clients are responsible to adhere to all activity and equipment use guidelines prescribed by their personal medical professional.
- When there is a wait list for aerobic equipment use, please limit your workout time on each machine to 20 minutes.
- When there are multiple users for the weight machine equipment, clients are asked to abide by standard Fitness room etiquette: All users are expected to vacate the exercise stations upon the completion of each set of repetitions in order to allow for use by other clients.
- Treadmill Use: Emergency stop clip must be worn and no reading is allowed.
- The City and fitness contractor assume no responsibility or liability for a clients misuse of equipment or failure to adhere to guidelines provided by client's medical professional or equipment manufacturer.

WAIVER & RELEASE OF LIABILITY

CITY OF FOUNTAIN VALLEY
COMMUNITY SERVICES DEPARTMENT
THE CENTER AT FOUNDERS VILLAGE
SENIOR AND COMMUNITY CENTER

I understand that using exercise equipment could be DANGEROUS, especially if you have any medical condition(s) that could be complicated by exercise. (Before you use the City of Fountain Valley Senior and Community Center's Fitness Room exercise equipment, it is recommended you check with a physician).

By signing this document, I the undersigned, acknowledge that I know IT MAY BE DANGEROUS to use the type of exercise equipment at the City of Fountain Valley Senior and Community Center's Fitness Room. By signing this document, I HEREBY ASSUME ALL RISKS involved in using the Senior and Community Center's Fitness Room exercise equipment or in participating in any other events at the facility or by the City of Fountain Valley.

IN ADDITION to the above, I hereby forever RELEASE and DISCHARGE the City of Fountain Valley, its officers and employees and fitness contractor, from any and all liabilities, claims, demands or causes of action that I may hereafter have for injuries and damages arising out of participating in any City Recreation Program or using any Facility including, but not limited to, losses caused by the passive or active negligence of the released parties or of hidden, latent or obvious defects or dangerous conditions in any City Recreation Program or Facility. This Release shall also release the Released Parties from related activities not conducted on City property, including travel and off-site activities.

I understand that Recreation Activities may involve risks and dangers that no amount of care, caution, instruction or expertise can eliminate and I EXPRESSLY AND VOLUNTARILY ASSUME ALL RISK OF INJURY while participating in any City Recreation activity. This release shall remain in effect until revoked and shall extend to all City Recreation Programs activities and facilities that participant may hereafter participate in. A copy of this Release may be used to the same extent as the original.

DID YOU READ THIS DOCUMENT (YES OR NO)? _____ QUESTIONS ON THIS PAGE NEED TO BE ANSWERED, THEN CITY REPRESENTATIVE CAN CONFIRM YOUR UNDERSTANDING OF THIS RELEASE OF LIABILITY.

Client's Printed Name: _____

Client's Signature: _____

City representative, please ask the client after reading the Release of Liability, to answer the below questions and get their signature. After these questions are answered by the client, a City representative will verify the client has read and understands the RELEASE OF LIABILITY form.

- **Can you explain to me what you just signed (Circle One)? Yes or No** | Client's Signature: _____
- **Do you understand that you were advised that physical exercise on the fitness center equipment may be dangerous to you (Circle One)? Yes or No** | Client's Signature: _____
- **Do you understand that you are releasing the City of Fountain Valley and Fitness Contractor of all liability if you are injured (Circle One)? Yes or No** | Client's Signature: _____

Print Name: _____

City Representative Name: _____

Signature: _____

Signature: _____

Date: _____

Date: _____

FITNESS ROOM EQUIPMENT TRAINING LIST

Clients interested in working out during the unsupervised, open Fitness Room hours will need to complete training on the equipment listed below. The form will then be placed in the Fitness Room's usage file with the signed Release of Liability.

Client's Printed Name: _____

Training Date : _____

CARDIO EQUIPMENT

NUSTEP TRS 4000



LANDICE L9 TRAINER-TREADMILL



LIFE FITNESS 90X ELLIPTICAL CROSS TRAINER



LIFECYCLE 90C UPRIGHT BIKE



LIFECYCLE 90R RECUMBENT BIKE



STRENGTH EQUIPMENT

HAMMER SEATED DIP



LIFE FITNESS 3 MULTI GYM STATION



LIFE FITNESS DUAL ADJUSTABLE PULLEY



LIFE FITNESS PRO2 SERIES PEC. FLY REAR DELTOID



LIFE FITNESS CLUB SERIES WITH ADJUSTABLE BENCH



STRETCH EQUIPMENT

STRETCH TABLE



I have been instructed on how to use all the above equipment except for those which I chose not to get training or do not have enough working knowledge of equipment.

Client Signature: _____

Staff Signature: _____