



Membership Application Form

MEMBER DETAILS	
SURNAME	
FIRST NAME	
TENANT	
MOBILE #	
EMAIL ADDRESS	

EMERGENCY CONTACT DETAILS	
SURNAME	
FIRST NAME	
MOBILE #	

MEMBER SIGNATURE _____ DATE: _____

CTC OFFICE USE ONLY		
INDUCTION	PART A	PART B
DATE OF INDUCTION		
INDUCTION COMPLETED BY		
MEDICAL CONDITION LETTER REQUIRED?		
DATE MEDICAL LETTER RECEIVED		
INVOICE NO ISSUED		
DATE MEMBERSHIP PAID		
ACCESS KEY # ISSUED		
DATE WELCOME PACK ISSUED		



I, **(PRINT NAME)** _____, for the purpose of being allowed to participate in activities at the Build Fitness 24/7 Gym, agree to, acknowledge and accept the following conditions of use:

- I warrant that I have no medical condition (whether medically diagnosed or not), that might affect my ability to safely participate in any activities while on the gym premises. The term “activities” includes any training or exercise activities whatsoever that I may undertake on the premises whether or not these are promoted by CTC itself;
- I warrant that I have obtained appropriate medical advice before applying for membership;
- I acknowledge that it is my responsibility to obtain appropriate medical advice and clearance from a medical professional before participating in any form of training or exercise activity;
- I acknowledge that training and exercise activities could lead to injury (including exacerbation of an existing condition) or death if undertaken without prior medical clearance or contrary to medical advice;
- I acknowledge that neither CTC nor its staff, agents or contractors are in a position nor agree to provide medical advice or supervision, and that if such advice or supervision is required then I should obtain such advice from a suitably qualified source;
- I acknowledge that CTC’s request or receipt of a medical clearance letter (or any failure by CTC to request such a letter) does not constitute a warranty or representation by CTC that I am medically fit to participate in any training or exercise activity;
- I acknowledge that CTC’s request or receipt of medical related information (or any failure by CTC to request such information) as part of the induction process or Questionnaire does not constitute a warranty or representation by CTC that the member is medically fit to participate in any training or exercise activity;
- I acknowledge that I am unable to assign any rights arising from my membership to any other party;
- I warrant that I am currently employed by either CTC or one of CTC’s permanent tenants;
- I hereby release CTC, CTC’s staff, agents and authorised contractors to the full extent under law.
- **Gym membership fees:**
 - Are \$60 per annum (including GST);



- The membership year runs from July to the following June (in line with the financial year);
 - Should members wish to join the gym at any other time other than commencement of the financial year, the fees will be \$5 (including GST) for each full month remaining in that financial year;
 - Must be paid for the full financial year in advance (no month by month arrangements are permitted);
 - Payment can be made at the CTC Precinct Management office by EFTPOS only.
- **Gym membership cancellation policy**
 - CTC reserves the right to terminate or suspend membership (for example but not limited to) in the following instances:
 - Misuse of equipment;
 - If Members provide entrance to the gym to unauthorised non-members;
 - Fighting, inappropriate behaviour towards other patrons or other misbehaviour;
 - Illegal behaviour;
 - Failure to pay amenity fees (on time or at all);
 - In the event of emergencies;
 - If required by court order or law;
 - In the event of a force majeure event.
 - In the event that the member requests cancellation
 - Members can request that their membership be cancelled on instruction from their medical practitioner or in the event that their employment at CTC precinct ends;
 - The member may request cancellation by any of the following means:
 - Email to bookings@ctc.qld.edu.au
 - Phone notification to CTC (3216 6711)
 - Advise in person at the CTC Precinct Management office
 - CTC will refund any full month's fees remaining in that financial year to the member in such an event.



- **Gym membership expiry**
 - As the membership year runs as per the financial year (from July to the following June), membership expires on the 30th June at 11.59pm of each membership period (unless renewed and paid in full prior to this time).
- **Safety matters**
 - I acknowledge that CTC has provided a duress button for emergencies in the gym. Once activated, this will result in CTC's security provider investigating and contacting emergency services if required.
 - If this is a medical emergency, press the duress button AS you call 000;
 - I acknowledge that I will follow any directives from CTC and its staff on all safety matters.
- **24/7 Access – Security access card**
 - I acknowledge that the security access key card that I have been provided with, may electronically store all personal details I have supplied on this form, inclusive of membership expiry;
 - I am also aware that it will electronically record all details of my access to the gym area. I further acknowledge that this key card remains the property of the CTC and must be returned within 3 working days of membership expiry (refer to Gym Membership expiry), unless a renewal form is completed with relevant fee paid;
 - Any personal details recorded will be maintained in accordance with our Privacy Policy and legislation;
 - I am aware that failure to return my allocated key card upon expiry will result in CTC issuing an invoice for \$7.70 including GST as replacement cost for the key card and the same fee will also apply if I misplace, damage or lose my allocated key card and request a replacement access card be issued.
- I acknowledge and declare that during such times as I am present on the premises and its immediate surrounds, both my property and my person shall be so at my own risk. I will not hold CTC (or any of its employees, agents or contractors) liable for any personal injury or loss of or damage to property, however caused.
- I commit to observing and abiding by all rules, regulations and advice within the gym, inclusive of signage, verbal instruction or email correspondence from CTC staff, agents and contractors.



CTC reserves the right to amend these rules and regulations from time to time. Should any rule or regulation conflict with the terms listed herein, the terms of this agreement will prevail.

- I accept that it is my responsibility to utilise the gym facilities and equipment in a safe manner and to undergo a thorough induction into the appropriate and safe use of all equipment before commencing gym use and seek qualified advice if ever I am in doubt. If I do not observe safety guidelines, I acknowledge that I am at risk of serious injury.
- “Don’t walk by”. I will promptly notify CTC if I perceive any risks or hazards within the gym and surrounds, in order to ensure a safe environment for all gym users.
- I will not allow any non-members access to the gym facilities or equipment, at any time.
- I hereby release the officers at CTC from all liability for any and all damages. I acknowledge that participation is entirely at my own risk and by my own choice. I understand that the risk of accidental injuries are possible from any activity within the gym, and
- I acknowledge that I am personally liable for any injury or death caused to third parties, including other gym patrons and CTC staff, agents and contractors.
- I acknowledge that I am liable to be recorded by CCTV cameras installed, and consent to video surveillance.
- I acknowledge that I have read the Terms (including the warnings contained therein) and understand and accept the relevant risks.

WARNING: Any activity involving physical exercise creates the possibility of accidental injury. The CTC Gym and it’s equipment is intended for use only by registered, fully paid and inducted members, inclusive of the individual signed below. Gym use without previous instruction is dangerous and should not be undertaken. Before commencing your workout, know your limitations and those of the equipment you plan to use, and obtain medical advice from your doctor before commencing any fitness activities.

Name: _____



Signature: _____ Date: _____