

# GUEST WAIVER



HOW DID YOU HEAR ABOUT THE HEALTH CLUB? \_\_\_\_\_

GUEST NAME: \_\_\_\_\_ BIRTHDAY: \_\_\_\_\_

EMAIL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

I agree that by use of the equipment, facilities, or services of Health Club, I expressly assume all risks and responsibilities for any and all injuries, damages, or losses including, but not limited to, loss of personal property by theft, or otherwise which I may incur on or about the Health Club premises and do hereby fully and forever release and discharge the Health Club, its owners, employees and agents and their respective successors and assign, from any and all claims and damages, rights of action, present, or future, whether the same be known or unknown, anticipated or unanticipated injuries or losses resulting from or arising out of my use or intended use of the facilities, equipment, or services of Marvin Lustbader Health Club.

I understand that an individual with silent coronary disease is at an increased risk of cardiac complications during exercise (i.e. sudden death) and should start with a program in a controlled setting. I further understand that Marvin Lustbader Health Club recommends every individual consult a physician prior to beginning exercise activity or programs.

Finally, I certify by my signature that I am in good health, suitable for physical activity and have my physician's approval to engage in exercise programming including cardio respiratory activity.

**The undersigned agrees to abide by all rules and policies of Marvin Lustbader Health Club** which are subject to change and which, in the opinion of the Club management, are deemed necessary and reasonable for the best interest of its members.

GUEST SIGNATURE:

\_\_\_\_\_

PARENT SIGNATURE

IF GUEST UNDER 18 YEARS OF AGE: \_\_\_\_\_

DATE: \_\_\_\_\_

# DISCOVERY



1. What brought you in today?
2. Former member, what did we do so well when you were a member that made you want to come back?
3. Is the club close to your work or home?
4. Is this membership for you or your family?
5. Is childcare something you will be using?
6. What is your level of activity, or how do you like to move?
7. What are your goals?
8. What potential barriers would impact you attending the club or meeting your goals
9. When was the last time you looked and felt your best?