



Studio Membership Agreement

NAME

First

Last

ADDRESS

Street Address

City

British Columbia

Province

Postal Code

EMAIL

TELEPHONE

EMERGENCY CONTACT PHONE NUMBER

MEMBERSHIP PAYMENT OPTIONS

Long Term Memberships

- Adult monthly: \$40.95 (available via "void" cheque/automatic debit)
- Student monthly (under 18): \$31.50 (available via "void" cheque/automatic debit)
- Annual adult: \$453.60
- Annual Student: \$340.20

Short Term Memberships

Payable with e transfer to positivelyfit@telus.net or cheque made out to Positively Fit

Summer (July 01-Aug 31) Adult: \$136.50

3 Months Adult: \$189.00

6 Months Adult: \$315.00

Summer (July 1-Aug 31) Student: \$115.50

3 Months Student: \$173.20

6 Months Student: \$283.50

MEMBERSHIP START DATE

STUDIO ETIQUETTE REQUIREMENTS

I have read and understand [Studio Etiquette requirements](#) including labelling my shoes with tags provided for Studio storage.

CONSENT ACKNOWLEDGEMENT: The facilities and exercise programs offered by Positively Fit have been designed to provide the optimum level of beneficial exercise and enjoyment without compromising the health and safety of members. I understand the facility does not always have an attendant on duty. I understand that the facilities and equipment must be used in a proper manner in order to minimize the risk of injury. This may be achieved through thoughtful and cautious use of the premises. I acknowledge the existence of the need for certain rules concerning the use of the facilities and I undertake to read those rules and abide by them. In consideration of my being permitted to become a member of the Positively Fit Personal Training Studio, I myself, my heirs, executors, administrators, successors and assigns, do hereby release and forever discharge, waive and save harmless, protect and keep indemnified, Positively Fit Personal Training, and all of their respective agents, employees, and representatives from and against any and all kinds of actions, claims, costs, expenses, and demands in respect of death, injury, loss or damage, to my person or property however caused arising out of my being permitted to attend at or any way take prior to, during or subsequent programs and/or activities as a member. I acknowledge that the membership fees may be increased from time to time upon the expiry of my current membership. I understand all membership privileges terminate on the date of expiration. Understand that membership fees are non-refundable except for medical reasons, provided that a written undertaking from a qualified physician stating same is submitted.

SIGNATURE