



MEMBERSHIP TYPE					
Membership Type	PCYC Membership	Pay per entry	10 visit passes	6 months	12 months
Adult Employed	\$60	\$4.00	\$38.00	\$240	\$400
Student/Concession	\$40	\$3.50	\$32.00	\$220	\$380
Police, Fire, Ambulance	\$0	\$3.00	\$28.00	\$180	\$320
MEMBERSHIP DETAILS					
First Name			Surname		
Date of Birth	/	1	Male/Female		
Address					
Suburb			Postcode		
Mobile Number			Home Phone		
Email Address					
FIRST I	EMERGENCY CONTA	MERGENCY CONTACT SECOND EMERGENCY CONTACT			NTACT
Name			Name		
Relationship			Relationship		
Contact Number			Contact Number		
STAFF USE ONLY					
T&C explained		Salto Access		Welcome email	

I acknowledge that the Huon Valley PCYC ("Club") is a not-for-profit organization. The Club funds its operations from membership fees, fund raising, community support, grants, and subsidies. The Club offers a range of activities, including the supply of recreational services and the use of gymnasium equipment at the Huon Valley Police and Citizen's Youth Club at 72 Wilmot Road, Huonville in Tasmania ("Centre"). I agree that my membership and my use of the facilities at the Centre is governed by this Agreement.

This Agreement consists of:

- 1. These Terms and Conditions;
- 2. The Club's Privacy Policy, as amended from time to time; and
- 3. The Club's Code of Conduct, as amended from time to time.

It is a condition of this Agreement that I participate in a scheduled orientation program.

Signature (Guardian if under 18)	Print Name (Guardian if under 18)	Date





ADULT PRE-EXERCISES SCREENING SYSTEM (APSS)

This screening tool is part of the Adult Pre-Exercise Screening System (APSS) that also includes guidelines (see User Guide) on how to use the information collected and to address the aims of each stage. No warranty of safety should result from its use. The screening system in no way guarantees against injury or death. No responsibility or liability whatsoever can be accepted by Exercise & Sport Science Australia, Fitness Australia, Sports Medicine Australia or Exercise is Medicine for any loss, damage, or injury that may arise from any person acting on any statement or information contained in this system.

STAGE 1 (COMPULSORY)

Signature (Guardian if under 18)



To identify individuals with known disease, and/or signs or symptoms of disease, who may be at a higher risk of an adverse event due to exercise. An adverse event refers to an unexpected event that occurs as a consequence of an exercise session, resulting in ill health, physical harm or death to an individual.

This stage may be self-administered and self-evaluated by the client. Please complete the questions below and refer to the figures on page 2. Should you have any questions about the screening form please contact your exercise professional for clarification.

for clarification.	lease tick your response	YES	NO	
Has your medical practitioner ever told you that you have a heart condition or have you ever suffered a stroke?				
Do you ever experience unexplained pains or discomfort in your chest at rest or during physical activity/exercise?				
3. Do you ever feel faint, dizzy or lose balance during physical activity/exercise?				
4. Have you had an asthma attack requiring immediate medical attention at a last 12 months?				
5. If you have diabetes (type 1 or 2) have you had trouble controlling your blood sugar (glucose) in the last 3 months?				
6. Do you have any other conditions that may require special consideration for	or you to exercise?			
IF YOU ANSWERED 'YES' to any of the 6 questions, please seek guidance from an appropriate allied health professional or medical practitioner prior to undertaking exercise.				
IF YOU ANSWERED 'NO' to all of the 6 questions, please proceed to question 7 and calculate your typical weighted physical activity/ exercise per week.				
Describe your current physical activity/exercise levels in a typical week by stating the frequency and duration at the different intensities. For intensity guidelines consult figure 2.	Weighted physica	al activity/exerc	ise per week	
Intensity Light Moderate Vigorous/High	Total minutes = (m		•	
Frequency (number of sessions per week)	(2	x minutes of vigo	orous/high)	
Duration (total minutes per week)	TOTAL = minutes per week			
If your total is less than 150 minutes per week then light to moderate intensity exercise is recommended. Increase your volume and intensity slowly.				
If your total is more than or equal to 150 minutes per week then continue with your current physical activity/exercise intensity levels.				
It is advised that you discuss any progression (volume, intensity, duration, modality) with an exercise professional to optimise your results.			imise your results.	
I believe that to the best of my knowledge, all of the information I have supplied within this screening tool is correct.				

Print Name (Guardian if under 18)

Date





PAYMENT OF FEES

I agree to pay all membership fees on the dates they fall due.

PHYSICAL CAPACITY TO EXERCISE

I represent to the Club that to the best of my knowledge, I do not have any physical, medical, or other disability or condition which may be affected or aggravated by, or which may result in any sickness, injury or death to me as a result of my use of the Centre and its facilities.

If I have any health or medical **concerns,** I must discuss these with my doctor before using the Centre and its facilities. I agree it is my responsibility not to use any equipment which may adversely affect any medical condition I may have.

ACCEPTANCE OF RISK

I acknowledge that whilst every attempt is made to ensure that the recreational services and facilities provided by the Club at the Centre are safe, there are some significant and inherent risks involved.

I agree that I am participating voluntarily at my own risk and responsibility, thereby exposing myself to certain risks.

I acknowledge that whilst I am engaged in physical activity and recreational services at the Centre, I am at risk of suffering physical harm or personal injury including broken bones, soft tissue injuries, joint injuries, permanent disability, or death. These injuries may occur from me:

- (a) slipping on wet flooring;
- (b) being struck by weights;
- (c) colliding with equipment, or other people present at the Centre;
- (d) engaging in strenuous exercise and activities; and
- (e) using equipment incorrectly.

I acknowledge that any such injury may result not only from my actions but from the actions, omissions, or negligence of others.

WAIVER OF LIABILITY AND INDEMNITY

To the extent permitted by law, I agree that the Club be excluded from liability for ordinary negligence in the provision of services and operation of equipment at the Centre.

I agree to discharge and release the Club, its employees, and agents from all liability for death, disability, personal injury, damage to property, theft, claims or actions of any kind, howsoever caused, whether as a consequence of negligence or otherwise, resulting from my use – directly or indirectly – of services and facilities at the Centre.

I agree to indemnify and hold harmless the Club, its employees, and agents from all liabilities, claims or actions, as mentioned above, irrespective of whether the Club, its employees or agents may have been negligent. This is subject to the exception that this exclusion of liability shall not apply in circumstances where the conduct of the Club, its employees, and agents, is reckless. I agree to indemnify the Club, its employees and agents for any loss or damage arising from the use of services and facilities at the Centre and I agree that this indemnity may be pleaded as a complete defense to any legal proceedings or any right I may claim against the Club.

LIABILITY FOR PROPERTY

I agree that the Club is not liable to me for any personal property that is damaged, lost, or stolen while on or around the Centre including, but not limited to, a vehicle or its contents or any property left in the Centre.

I agree that If I cause damage to the Centre or any equipment, I am liable to the Club for its cost of repair or replacement.

Signature (Guardian if under 18)	Print Name (Guardian if under 18)	Date





CODE OF CONDUCT

I agree to be bound by the terms of the Club's Code of Conduct. This includes the following obligations:

I must:

- Wear closed in shoes appropriate for the type of activity being undertaken by me at the Centre.
- Wear clothing that covers the upper torso as well as the lower torso.
- Comply with all health-related directions regarding attempts to limit the spread of COVID (or similar virus or condition).

I must not:

- (a) conduct or participate in any unauthorized personal training.
- (b) consume food or drink at the Centre, except for water. (This obligation does not apply to food or drink being consumed in the Fun Factory eating area or Kitchen).

I acknowledge that the Centre is an alcohol, smoke and drug free environment and any use of these items in the Centre will result in automatic cancellation of membership and expulsion from the Centre.

I acknowledge that failure to comply with any terms of the Club's Code of Conduct may result in the termination of my membership.

PRIVACY POLICY

I acknowledge that, as part of my membership, the Club will collect certain personal information about me, that we collect about me, and that information will be handled by the Club in accordance with its Privacy Policy.

I agree that the Club may use my personal information in accordance with the Club's Privacy Policy and for any purpose associated with the operation of facilities at the Centre. I consent to this information being passed on to the relevant persons such as the Club's agents, service providers and suppliers to enable the Club to operate as a government and community funded provider of recreational facilities.

I authorize the Club to take and use photographs, videos, or sound recordings of me/and my family and any other reproductions or adaptations of me/and my family's likeness ("Material"), either in full or part, in conjunction with any wording or drawings, in any PCYC publications, productions or presentations. I acknowledge that I/and my family have no rights in the material or in any PCYC publications, productions or presentations that include the material.

AFTER HOURS ACCESS

I agree that any digital key, security fob or after-hours device provided to me as part of my membership at the Club remain property of the Club. Should I lose that key or device, I agree to meet the costs of replacing it.

MEMBERS ONLY ACCESS

I must not bring any non-member into the Centre. I acknowledge that any attempt to admit a non-member will likely result in my membership being terminated and, in addition, may result in my being liable to pay the membership fees of that non-member.

JURISDICTION

This agreement is governed by the laws of Tasmania, Australia.

MINIMUM AGE

All users of the gym facilities at the Centre must be a minimum of 16 years of age. Membership is permitted for users aged 16 or under with the consent and signature of the minor's parent or legal guardian. Minors can only access the Club with a parent or legal guardian.

Signature (Guardian if under 18)	Print Name (Guardian if under 18)	Date