



Membership Number

Staff:

Membership Application

| Title | Title | Surname | D.O.B | Membership Type | Par Q |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

HOW DID YOU HEAR ABOUT US?

Corporate Membership

Company Name:

Contact Details

Home Address: Post Code:

Home Tel:

Work Tel:

Mobile Tel:

Email:

Payment Details

| Monthly | Primary | Associate | Total | Annual | Primary | Associate | Total |
|-------------|----------------------|----------------------|----------------------|-------------|----------------------|----------------------|----------------------|
| Joining Fee | <input type="text"/> | <input type="text"/> | <input type="text"/> | Joining Fee | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Pro Rata | <input type="text"/> | <input type="text"/> | <input type="text"/> | Annual Fee | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Next Month | <input type="text"/> | <input type="text"/> | <input type="text"/> | | | | |
| | | Total: | <input type="text"/> | | | Total: | <input type="text"/> |

Minimum DD Payments:
 Monthly DD Amount:
 DD Start Date:

Membership Start Date:

Commitment Period:

Application Declaration - Before signing please read the terms set out below and overleaf

I/We confirm the above information is correct and apply for membership of theclub@chilworth-manor under the terms and conditions which I/we have been relayed, have been shown and discussed. I/we acknowledge that my/our membership of theclub@chilworth-manor is for the commitment period shown above and agree to pay in full all amounts due in respect of the commitment period

I/We confirm the having received the following documents: Membership Application: T&C's: Direct Debit:

Signature (s) Primary Member: Date:

Associate Member Date:

Policy Statement: the club will use your personal information disclosed for administration purposes. We may share your information with our Chilworth companies and agents who process information on our behalf: If you do not wish to receive information about Chilworth Manor and carefully selected products and services of 3rd parties which we think may be of interest to you please tick this box:

Guest Pass 1

Guest Pass 2

Guest Pass 3

MEMBERSHIP TERMS AND CONDITIONS



If you have any questions regarding the membership terms and conditions please do not hesitate to contact us on: theclub@chilworth-manor.co.uk

These membership terms and conditions form part of your membership agreement with theclub@chilworth-manor. The essential aspects of the membership are discussed with you prior to your joining, please feel free to direct further questions to one of the team who will be happy to help.

- a) On joining theclub you have the choice of either a 6,12,or 18 month agreement (membership fees differ). By doing so, you are agreeing to remain a member for at least, the allotted commitment period.
- b) If you choose to pay your membership fees monthly your membership will continue automatically after the initial commitment period is ended. If you choose to join theclub by paying your commitment period membership fee in advance, your club membership will end automatically unless you renew the membership for a further term (provided the notice period has been completed, refer to clause i) Joining fees are non refundable on cancellation of membership under any circumstances.
- c) As a member, you will have access to theclub facilities provided your membership is current and fully paid up or you have made payment arrangements acceptable to theclub. Details of theclub's current opening hours and facilities are available from reception
- d) If membership payment or any amount due under this agreement is not paid for a period of more than thirty days then we may pass the debt to a third party company for collection. The costs incurred in employing the third party will become borne by you including costs in tracing you should you have changed address without informing theclub.
- e) Where the employment of a member is relocated or moving property (more than 25 miles from theclub premises) or the member suffers redundancy or has a medical like condition that precludes use of all club facilities, membership may, at the discretion of the club manager, be transferred, or cancelled. All requests for consideration must be addressed in writing, with original supporting documentation to:
The Club Manager, theclub@chilworth-manor, Chilworth Manor Hotel & Conference, Chilworth, Southampton, Hampshire, SO16 7PT
- f) During the commitment period theclub may allow you to suspend your membership, free of charge. Membership suspension can be taken for a minimum of 1 month and maximum of 3 months in the following circumstances: medical illness or injury, pregnancy, redundancy, temporary relocation by your employer or armed forces posting.
- g) theclub may require reasonable evidence of your inability to use theclub for a minimum of one month, for instance: a doctors certificate, P45, Military ID (1250 card), employer's letter. The suspension period will start from the 1st of the month following the end of the one month notice period.
- h) Where it is agreed that a membership be cancelled within the agreement period (refer to clause e), an amount equal to two months full membership is payable by way of notice. In addition an administration charge equal to the standard enrolment fee will be made.
- i) In the unfortunate event that you wish to end your membership at theclub, we request that you provide at least two complete calendar months written notice. Your membership will end at the end of the second complete calendar month after the notice was given **provided the membership term (6, 12, or 18 months) has been completed.**
- j) All club membership fees and other fees are reviewed periodically and any changes to these are generally implemented on theclub's anniversary each year.
- k) theclub provides lockers for storage of personal items and uses all reasonable efforts to provide a secure environment for you to enjoy. Nevertheless, theclub cannot entirely eliminate the risk of theft, damage, or loss of members' personal possessions. We therefore advise you not to bring valuable items such as jewellery or large amounts of cash to theclub. theclub accepts no responsibility for damage to or loss of your personal effects, property and vehicles unless such damage or loss arises from theclub's negligence.
- l) theclub will issue all members with a membership card upon joining. This card must be used when entering theclub@chilworth-manor. Should your card become lost or stolen a replacement charge of £8.00 will be payable.
- m) We realise that your requirements may alter over time; therefore, you can apply to change the category of membership at any time, once you have completed the first three months of your membership with us by giving at least one full month's notice.
- n) Full membership is open to those aged 18 years or above. Associate members may join theclub aged 16 years or above. Evidence of age will be required. In any event, young people must observe notices or instructions concerning the safe and proper use of all equipment and facilities.
- o) Please remember that it is your responsibility to attend the appropriate orientation. You must not use any equipment or undertake any activity unless you are competent to do so safely and properly.

Our club rules are displayed on the club notice board situated outside the studio. We invite all members to take a moment to read these details at any point during the membership you have with us.

A warm welcome to theclub@chilworth-manor. We sincerely hope that you approve of these membership terms and that it provides a foundation for your continued enjoyment of theclub.

PHYSICAL ACTIVITY READINESS QUESTIONNAIRE



| | | | | | |
|------------|--|-------|--|-------|--|
| New Member | | Guest | | Staff | |
|------------|--|-------|--|-------|--|

Full Name..... Membership No/Room No.....

This pre-exercise questionnaire has been designed to ensure you begin activity at the club@chilworth-maor safely. Please answer the questions below by ticking the box relevant to you. Thank you!

1. Has a doctor ever said you have a heart condition and that you should only do physical activity recommended by a doctor?
2. Do you feel pain in your chest when you do physical activity?
3. In the past month, have you had chest pain when you were not doing physical activity?
4. Do you lose balance because of dizziness or do you ever lose consciousness?
5. Is your doctor currently prescribing drugs (for example water pills) for your blood pressure or a heart condition?
6. Do you have diabetes mellitus?
7. Are you, or is there any possibility that you are pregnant?
8. Do you suffer shortness of breath at rest or with mild exertion?
9. Do you suffer with unusual fatigue with everyday activities?
10. Do you regularly get a sharp pain in your lower leg when walking uphill or upstairs which disappears within 1-2 minutes of stopping?
11. Do you know of any other reason why you should not do physical activity?

| Y / N | |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |
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If you have answered 'YES' to any of the above questions you will need to speak to a member of our Fitness Team as you may need to speak to your GP prior to using the club facilities.

12. Do you smoke?
13. Have you been told by your doctor that your blood pressure is high?
14. Have you been told by your doctor that your cholesterol is high?
15. Have your parents or siblings ever suffered from heart disease (mother/female under 65 years old or father/male under 55 years old)?
16. Are you physically inactive in both your work and leisure time?
17. Is your waist measurement more than 38 inches / 100cm?

| | |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> |

ALMOST DONE... PLEASE MAY WE KINDLY ASK ALL NEW MEMBERS TO COMPLETE DETAILS ON THE REVERSE

Questions 13-18 If you have answered 'YES' to two or more of these questions then you are advised to limit your activities to a moderate intensity activity well within your current capacity and sustainable for a prolonged period of time. Examples of this include brisk walking, slow cycling and gentle swimming.

Males 45 and over and females 55 and over not accustomed to regular physical activity, are recommended to limit their activities to a moderate intensity in the absence of their doctor's consent to exercise at a higher level.

New Member: Please read and sign the following declaration:

I acknowledge the information given above is correct to the best of my knowledge at the time of completion. I undertake to inform you immediately if any of the above changes. All details given are strictly confidential.

I undertake to use the fitness facility to exercise only in accordance with the instructions of the fitness staff. I acknowledge that any use of the facilities, equipment and participation in physical activity is entirely at my own risk.

Print Name:

Sign:

Date:

Member Induction Disclaimer (to be completed by new member):

- I confirm that I have been offered an induction and assessment but have declined this option
- I confirm I am familiar with the use of gym equipment including cardio, resistance and free weights.
- I confirm I will be exercising at my own risk & have no medical conditions that would preclude me from undertaking such an activity

Print Name:

Sign:

For Completion by Gym Staff:

I confirm this Physical Activity Readiness Questionnaire / PAR Q has been reviewed. If the new member named above has ticked "YES" to any questions these have been reviewed and discussed. Notes of advice & guidance given are detailed below:

Print Name:

Sign:

Date:

Position:

Data Protection Act



I hereby give permission to Chilworth Manor Limited, owners and operators of the **theclub**@chilworth-manor to store my personal details electronically.

I agree that the **theclub**@chilworth-manor can use my photograph for identification purposes and the image will only be used for the safety and security of all the members and hotel guests using the facilities.

I understand that Chilworth Manor Limited will use the data only in connection to my membership of the **theclub**@chilworth-manor and will not pass my information onto any third parties.

I retain the right at all times to request a copy of the data held and to correct any inaccuracies in the data.

Member Confirmation:

Name: _____

Membership No: _____

Signed: _____

Date _____



Instruction to your Bank or Building Society to pay by Direct Debit



Please fill in the whole form and send it to:

theclub@chilworth-manor
Chilworth, Southampton,
Hampshire
SO16 7PT

Name(s) of Account Holder(s)

Bank/Building Society account number

Branch Sort Code

Name and full postal address of your Bank or Building Society

| | |
|-----------------|-----------------------|
| To: The Manager | Bank/Building Society |
| Address | |
| Postcode | |

Originator's Identification Number

| | | | | | |
|---|---|---|---|---|---|
| 6 | 9 | 0 | 7 | 6 | 9 |
|---|---|---|---|---|---|

Reference Number

| | | | | | | | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

Instruction to your Bank or Building Society

Please pay **Chilworth Manor Ltd** Direct Debits from the account detailed in this Instruction subject to safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with **Chilworth Manor Ltd** and, if so, details will be passed electronically to my Bank/Building Society.

| |
|--------------|
| Signature(s) |
| |
| Date |

Banks and Building Societies may not accept Direct Debit Instructions for some types of account.



The Direct Debit Guarantee



- This Guarantee is offered by all Banks and Building Societies that take part in the Direct Debit Scheme. The efficiency and security of the Scheme is monitored and protected by your own Bank or Building Society.
- If the amounts to be paid or the payment dates change **Chilworth Manor Ltd** will notify you 10 working days in advance of your account being debited or as otherwise agreed.
- If an error is made by **Chilworth Manor Ltd** or your Bank or Building Society, you are guaranteed a full and immediate refund from your branch of the amount paid.
- You can cancel a Direct Debit at any time, by writing to your Bank or Building Society. Please also send a copy of your letter to us.