



## Membership Terms & Agreement

### GENERAL INFORMATION

Name:

Date of Birth:

Age:

Phone:

Address:

Email:

City:

State:

Zip:

Insurance Carrier:

Fob ID #:

Fitness Benefit?

\$10

Deposit:

Date:

### EMERGENCY CONTACT

Name:

Relationship:

Home Phone:

Cell

Phone:

Physician's Name/Clinic:

Phone:

### Membership Fees

**One-time Enrollment Fee:**  \$43.00 (single)  \$86.00 (Dual)

#### Monthly Fee:

\*GA Family:  \$29.00 (single)  \$46.00 (dual)

Community:  \$40.00 (single)  \$58.00 (dual)

#### Fob Fees:

\$10.00 Fob fee  \$7.00 *Monthly* activation fee (Extended Hours ONLY)

*\*Includes: Tenants of any Guardian Angels' owned or managed communities, GA Legacy Society & Family of Angels' Members, GA employees.*

## Guidelines

- Guardian Angels' Wellness Center Members must be **50+ years of age**.
- Wellness Center *supervised* hours are Monday-Friday from 8:00 am – Noon; 1:00 pm - 6:00 pm. *These hours are subject to change*.
- Please select from the membership fee options available for Guardian Angels' Wellness Center as listed on page 1 of the application.
- Membership dues include unlimited use of HUR fitness equipment, cardiovascular equipment and exercise accessories within the Wellness Center, group fitness classes within business hours, and other wellness programs and presentations.
- Please remember to leave HUR Smartcards on the computer desk before exiting the Wellness Center. Failure to do so will result in a \$20 (+ tax) replacement fee.

## Membership Fees Payment & Cancellation

- *Enrollment Fee*: This is a one-time only and non-refundable fee, except as otherwise described. If this membership is terminated, a separate Enrollment Fee will be due to obtain a new membership.
- *Fob Fees*: Effective June 1, 2017 ALL members residing outside of GA Housing will need to purchase a Club GA fob to enter the locked building at \$10/fob. If fob is lost, an additional \$10 will be charged for a new fob. *Extended Fob Hours*: \$7/month.
- Guardian Angels' Wellness Center Membership monthly fees are due within the first five (5) days of each month. Automatic withdrawal from bank accounts will occur between the 5<sup>th</sup> and 8<sup>th</sup> of each month. Automatic withdrawals and checks will be the only accepted forms of payment.
- Obligation to pay membership dues is not dependent upon usage of the Guardian Angels' Wellness Center, participation in Wellness Programs, or availability of or access to the Wellness Center.
- Your membership has no term obligation. If you choose to suspend or cancel your membership, a written and signed document **MUST** be received minimum 14 days prior to the termination date (1<sup>st</sup> of following mo). If a written, signed document is not received within the 14 days, the following month will be charged the normal membership fee.
- A late fee will be assessed to membership fees not received by the 15<sup>th</sup> of the month and this membership may be suspended, considered delinquent or terminated without notice and at the option of the Wellness Center, if fail to pay any membership fees within 30 days of them being due.
- **Silver & Fit members: must** enroll Club GA as Fitness Center by calling ASH Fitness **PRIOR** to the start of membership with Silver & Fit program. If visit claims are denied, member will be responsible for paying the monthly membership fees as indicated on page 1. It is the member's responsibility to confirm Medicare supplement health fitness benefit enrollment to cover Club GA fees.

## Insurance Reimbursement

- If applicable, wellness participation incentives earned from your health insurance provider will be reimbursed into your personal bank account the 25<sup>th</sup> of the month after the incentive quota is met. This reimbursement will be issued directly from your insurance provider. It is important to know and comply with what your incentive plan requires.
- Please make sure to “sign-in” each time you participate in any Wellness Center activity or program in order to receive proper credit for your incentive program.
- Club G.A. is not responsible for missed incentive credits or if there was a change in insurance fitness benefit without notifying staff.

## Club G.A.’s General Policies & Procedures

**Policy statement:** *It is the policy of Club G.A. to provide use of the Wellness Center to GA’s current tenants, GA Legacy Society & Family of Angels’ Members 50+, community members 50+, and GA full and part-time employees.*

### Procedure:

- Requirements for use of the Wellness Center, including use of exercise equipment and participation in wellness programs.
  - All participants must have current Club G.A. membership
  - All members must have completed Health History Form, Exercise Waiver and Release of Liability form on file with Club G.A.
  - It is the expectation that participants who use the Wellness Center will do so independently.
  - Each individual utilizing Wellness Center must participate in an orientation and tour by a member of Club G.A. staff. The orientation is designed to familiarize the participant with the equipment and emergency procedures.
  - Club G.A. reserves the right to limit, restrict, or deny access to individuals in the Wellness Center.
- Hours of Operation
  - Club G.A. will be open Monday-Friday, 7:00 am-6:00 pm, unless otherwise noted. Extended hours (with monthly \$7 fob fee): 6am-8pm; 7 days/week. Hours of operation are subject to change.
- Code of Conduct
  - Proper Attire:
    - Shoes, shirt and shorts/pants are to be worn at all times.
    - Athletic shoes and comfortable clothing are highly recommended.
    - For safety reasons, open-toed shoes are not to be worn unless authorized by Wellness Staff.

- Street shoes are not allowed to be worn in the Wellness Center space. Please bring separate shoes to wear while in the Wellness Center, and leave street shoes and other personal belongings in the Club G.A. closet.
- Common Courtesy While Using Wellness Center space
  - Profanity will not be tolerated.
  - Water (in a covered/capped container) is allowed. No other food or beverages are allowed in the exercise space.
  - Personal belongings (bags, coats, shoes, etc.) must be kept in the cubbies and Club GA closet.
  - Return all exercise equipment to the proper location when you are finished using them.
  - Wipe off equipment after use (please limit two disinfecting wipes per visit).
  - Limit cardio equipment to 20 minutes if another member is waiting.
  - Work cooperatively if more than one individual wishes to use a particular piece of HUR strength equipment at any given time.
  - If any exercise machines are not working, please notify Club G.A. staff immediately.
  - If a blood-related injury occurs, halt activity and notify Club G.A. staff immediately to administer treatment and activate biohazardous clean-up procedures.
  - Report all injuries to Club G.A. staff immediately.
  - Smoking, tobacco and alcohol are prohibited.
- **Guest Policy**
  - Adult Guest Qualifications:
    - In order for someone to use the Club G.A. Wellness Center as an adult guest (Minimum 18 years of age), they must be with a current member. Adult guests are not allowed to access the facility without the current member. Members will receive 3 free guest passes per year. Once a member's guest passes have been used, guests can purchase a daily pass for \$7.00.
  - Requirements for Use of the Club G.A. Guest Policy
    - A guest is defined as someone who is currently not a member of Club G.A.
    - All guests of Club G.A. must sign an Exercise Waiver and Release of Liability form prior to using the facility.
    - Guests do not have to adhere to the 50+ age policy *if their accompanying Club G.A. member is 50+.*

- Guests must follow all the policies and procedures outlined in this document. Failure to follow these policies and procedures will result in termination of guest privileges.
  
- **Guardian Angels' Employee Policy**
  - Employees are to use the Wellness Center either before or after their work day, or when an employee has punched out over their lunch break. Employees are not permitted to utilize the Wellness Center during their 15 minute clocked-in breaks.
  - Employees must be 18 years of age to obtain Club G.A. membership.
  - If an employee wishes to have *dual membership*, either employee or membership partner (living in same household) must be 50+ years of age.
  
- **Emergency Policies & Procedures**
  - In the event that you or another individual becomes injured or experiences a medical emergency, please call 911 immediately and notify Club G.A. or other Guardian Angels' staff. For personal safety, do not attempt to assist or aid the injured party.
  - It is the expectation that the participants who use the wellness center will do so independently.
    - For minor injuries (cuts, abrasions, etc.) a first aid kit is located on the south wall of the wellness center next to the fire extinguisher.
    - For serious injuries or medical emergencies that require medical treatment or emergency personnel assistance, dial 911 from the courtesy phone. *An AED is available for ALL to use. The AED is located on the wall to the left of the back door entering the Club GA hallway outside the Dressing Room.*
    - Report all injuries to Club G.A. staff.
  - In case of severe weather, you will be asked to exit the Wellness Center and evacuate into the Housing Department hallway. Head East through Senior Dining Center to reach this shelter area. Please note Evacuation Routes posted in the Wellness Center for further clarification.
  - In the event of a fire, or if you smell or see smoke, exit the building immediately. The closest fire alarm is located just outside of the Wellness Center in the Club G.A. lobby. Call 911 immediately from a cell phone or business nearby once you reach a safe location.

*I have read the above information regarding Club G.A. Membership. I fully understand and accept responsibility for the information presented in this membership application.*

**Print:** \_\_\_\_\_ **Sign:** \_\_\_\_\_ **Date:** \_\_\_\_\_



**Wellness Center & Exercise Program Waiver**

I understand that the benefits from participating in an exercise program include learning more about lifestyle education pertaining to exercise.

I understand that there are risks involved with any exercise program. These risks include, but are not limited to: cardiovascular complications, stroke and muscle strain and/or soreness. I agree to participate voluntarily knowing these risks exist. I state that I am free of any medical conditions that present exercise as a contraindication, or that I have permission from my doctor to engage in physical exercise activity.

I realize that the use of wellness center is a privilege and failure to follow proper procedures and policies may result in the loss of this privilege.

I release Guardian Angels, Club G.A. and its associated personnel from any responsibility or liability for any injury or health consequences that may result from my participation in this program. My signature indicates that I have full knowledge of the purpose of this program, risks involved and the benefits I may expect. I agree to participate on this basis.

**Initial** \_\_\_\_\_ **Date** \_\_\_\_\_

\_\_\_\_\_

**Print Name**

**Signature**

**Date**