

Fitness Club Membership Application

Fitness Staff Initial _____

St. Lawrence University

Do you need a card? Y N

Stafford Fitness Center at Newell Field House

Date Y N

Canton, NY 13617

Date Y N

Phone: (315)-229-7260 Fax: (315)-229-5589

Primary Member- Please PRINT clearly!☺

Last Name _____ First Name _____ Initial _____

Mailing Address _____

City _____ State _____ Zip _____ Phone _____

Date of Birth ____/____/____ (Seniors/Youth: **Proof of Age required.**) Age _____

Physician _____ Emergency Contact _____ Phone _____

Family Membership Information

If applying for a family membership, please provide information for each authorized family member. **Each family member must fill out separate PAR-Q forms. Family is 4 members immediate family.**

Last Name _____ First Name _____ Date of Birth _____ Age _____

Last Name _____ First Name _____ Date of Birth _____ Age _____

Last Name _____ First Name _____ Date of Birth _____ Age _____

Last Name _____ First Name _____ Date of Birth _____ Age _____ Extra \$35

Membership Fees

1month 3 months 6 months 12 months

Community

Individual Adult –Full facilities CIA \$60 \$150.00 \$265.00 \$445.00

Individual Adult-Limited CIX \$75.00 \$130.00 \$220.00

(no fitness Center/Tennis)

Family-Full facilities CFA \$200.00 \$365.00 \$665.00

Family-Limited (No Fitness/Tennis) CFX \$80.00 \$145.00 \$265.00

Youth-Full facilities age 14-21CYA \$75.00 \$130.00 \$220.00

Monthly CIM \$60.00

Specials: Canton Police/FD, Pyrites FD and Rensselaer FD Annual Fee: \$30 limited, \$60 Full

SLU Graduate Class Year _____

Individual Full facilities AIA \$75.00 \$130.00 \$220.00

Family Full facilities AFA \$150.00 \$265.00 \$445.00

Family Limited AFX \$75.00 \$130.00 \$220.00

(no fitness center/Tennis)

Seniors 62+ proof of age required

Senior –all facilities \$75.00 \$130.00 \$220.00

Senior –Limited (POOL AND TRACK only) Annual Renewal Fee \$30.00

Employees and Immediate Family – No Fees

Forms of payment: personal check, credit card (\$2 fee), cashier check

Email Address for Notification of Closures and Fitness Classes.

Email _____

Print Clearly

Additional Information:

Fitness Center Hours: Are subject to change due to intercollegiate athletic practices or contests and/or during non-academic sessions. Community Members: A family is identified as 4 members to include parent(s) and children ages 5-21. Children ages 0-4 are included in the family membership at no additional charge and do not count towards the 4 member limit. Additional children ages 5-21 can be added at an additional yearly charge of \$35
University Affiliated Members: Immediate family is identified as spouse and children ages 21 and under. Children over 21 are valid only if HR has determined they are covered under the family insurance policy. Lost card fee is \$20.00 All Memberships begin on the 25th of a month and end on the last day of a month.

OFFICE USE ONLY

Date _____ F/L _____

S& S _____ Fee _____

Saints _____ CK cash Credit

Email _____ Type _____

Staff _____ 1mo 3mo 6mo 12mo

Expiration Date _____

Date _____ F/L _____

S& S _____ Fee _____

Saints _____ CK cash Credit

Email _____ Type _____

Staff _____ 1mo 3mo 6mo 12mo

Expiration Date _____

Date _____ F/L _____

S& S _____ Fee _____

Saints _____ CK cash Credit

Email _____ Type _____

Staff _____ 1mo 3mo 6mo 12mo

Expiration Date _____

Date _____ F/L _____

S& S _____ Fee _____

Saints _____ CK cash Credit

Email _____ Type _____

Staff _____ 1mo 3mo 6mo 12mo

Expiration Date _____

ST. LAWRENCE UNIVERSITY
Physical Activity Readiness Questionnaire (PAR-Q) and You

Regular physical activity is fun and healthy, and increasingly more people are starting to become more active every day. Being more active is very safe for most people. However, some people should check with their doctor before start becoming much more physically active. PAR-Q has been designed to identify the small number of adults for who physical activity might be inappropriate or those who should have medical advice concerning the type of activity most suitable for them.

Common sense is your best guide in answering these few questions. Please read them carefully and check **YES** or **NO** opposite the question if it applies to you. If yes, please explain.

<u>YES</u>	<u>NO</u>	
___	___	1. Has your doctor ever said you have a heart condition? Yes, _____
___	___	2. Do you feel pain in your heart /chest/back when you do physical activity? Yes, _____
___	___	3. Do you lose your balance because of dizziness or do you ever lose consciousness? Yes, _____
___	___	4. In the past month, have you had chest pain when you were not doing physical activity? Yes, _____
___	___	5. Do you have a bone or joint problem that could be made worse by a change in your physical activity? Yes, _____
___	___	6. Is there a good physical reason, not mentioned here, why you should not follow an activity program, even if you wanted to? Yes, _____
___	___	7. Are you currently taking any medications? If YES, please specify. Yes, _____

If you answered YES to one or more of the above questions, then you may need written permission from a physician before participating in physical and aerobic fitness activities at the St. Lawrence University fitness center. Tell your doctor about the PAR-Q and which questions you answered yes to. Bring a medical release form signed by your doctor.

NO to all questions

If you answered NO honestly to all questions above, it gives a general indication that you may participate in physical and aerobic fitness activities .The fact that you answered NO to the above questions is no guarantee that you will have a normal response to exercise.

- Begin slowly and build up
- If you have an abnormal symptoms stop immediately!

Signature _____ **Print** _____ **Date** _____

Signature _____ **Print** _____ **Date** _____

Signature _____ **Print** _____ **Date** _____

Signature _____ **Print** _____ **Date** _____

Newell/Augsbury/Stafford Facilities and Fitness Club

Rules and Regulations

*****PLEASE BE ADVISED*****

The St. Lawrence University Fitness Club provides the opportunity for alumni, community friends and visitors to use the St. Lawrence University athletic and recreation facilities for a reasonable fee. The facilities are available for Fitness Club Members use during posted hours. These hours are subject to change due to intercollegiate athletic practices or contests and/or during NON academic sessions. St. Lawrence University asks that you please check with staff or the Fitness Club web site to see facility availability.

Membership cards cannot be shared. Anyone caught using an ID card other than their own will be asked to leave the facility and the card will be taken. This could also warrant suspension or revocation of the membership. Membership fees will not be refunded.

Ronald B. Stafford Fitness Center

Welcome to the Ronald B. Stafford Fitness Center! The following rules and policies are needed to facilitate an environment in the Fitness Center that is satisfactory to all. Thank you in advance for your consideration.

- ❖ All Visitors must complete waiver form and pay a \$10.00 guest fee per visit.
- ❖ SLU Alumni and guests of SLU pay \$5 guest fee per visit.
- ❖ All belongings should be left in locker area – we are not responsible for lost/stolen items.
- ❖ Membership card must be given to the desk personnel to be swiped.
- ❖ Observe weight room etiquette and demonstrate courtesy towards others in the room at all times.
- ❖ Wear proper training attire Women (**no sports bras**) and Men (shirts), and athletic shoes, at all times.
- ❖ **Jeans and open toed shoes (sandals) are not permitted.**
- ❖ **No outside footwear** (clean and dry sneakers only).
- ❖ Show respect for equipment and facility at all times. Do not **drop** or throw weights.
- ❖ You may be expelled from the facility immediately if you misuse any equipment or facilities. If you fail to leave when asked, you will be assisted out by security personnel.
- ❖ Utilize spotters and locks when necessary (e.g., for overhead lifts, squats, bench presses, and platform lifts).
- ❖ Keep equipment off the floor and return it to its proper rack when lifting is completed.
- ❖ The on-duty supervisors have the authority over all room conduct and use of equipment. Including the sound system.
- ❖ Immediately report any facility-related injury or facility/equipment irregularity to the supervisors on duty.
- ❖ Tobacco, food, chewing gum, glass bottles, and cans are **not** allowed in the training facility; **plastic water bottles are acceptable.**
- ❖ Alcohol, drugs, and banned substances are not allowed in the training facility.
- ❖ Do not lean weights against the walls, equipment or leave on the floor. Return to storage racks.
- ❖ Break down bars after completing an exercise.
- ❖ Do not spit anywhere in the facility.
- ❖ Disinfectant solution available for your use after using equipment. Wipe off all equipment!!
- ❖ **NO CELL PHONES**
- ❖ **NO Hand Chalk Straps available if needed**

Shoes & Gear: Only **clean dry shoes** in all areas of the athletic facility. Non marking shoes on squash courts and Gymnasium.

Lockers & Keys: Day lockers located next to the Newell Front Desk. The lockers require a quarter which is returned. After storing your gear return key to the desk attendant. These lockers are for day use only. Locker and shower rooms are available for day use on request.

Parking: Parking for Club members is in the lot on the side of Newell Field House and in the rear of Newell Field House (Parking Lot D). The **circle** outside of the Robert B. Stafford Fitness Center is a **no parking zone**. Please **do not** park on the Augsburg side of the building. You will be ticketed and/or towed.

Newell Tennis Court: Any **member** wishing to use the Newell Tennis courts may do so on a first come first served basis. Please **limit use to 1^{1/2} hours** when playing. Newell Control Room attendants are available to set up and take down tennis nets. Please use their assistance if you are unfamiliar with this procedure. Valid club membership card required.

Robie Squash Court: Any member wishing to use the Squash Courts can be issued a squash court key at the Newell Control Room or Augsburg Equipment Room. A form of collateral (i.e. License) is to be left at the control desk. When the equipment is returned the collateral will be returned. Only **non-marking shoes** will be allowed in the squash courts. Please **No food or drink** in the squash court facility. When finished please lock the court and return key to attendant.

Ronald B. Stafford Fitness Center: Any member, 14 years of age and older, wishing to use the Ronald B. Stafford Fitness Center should familiarize themselves with the rules and etiquette of the fitness center also provided in this package. A Fitness Center orientation session is recommended and can be scheduled with trained fitness center staff. You may hire a personal trainer if preferred.

Children: Children 13 and under **must have parental supervision** while in the Augsburg/Newell/Stafford Facility and Appleton Arena. Children under the age of 14 are **not** allowed in the Fitness Center. Children 14 years of age can use the Fitness Center but must get instruction of proper technique before using the equipment.

Fitness Classes: Classes are offered to all Fitness Club members and Community. Class fee categorization is as follows: **Students:** College or High School Students. **Members:** Current Fitness Club Members, Faculty/Staff, SLU Retirees, **Non-members:** General Community.

Pool: Open to Club Members. Hours vary; call 229-5368 for current hours. Birthday Parties available with prior arrangements. Call Bob Clemmer @ 229-5884 for more details.

Climbing Wall: **Open to Fitness Club Members. Special Groups call 229-5016 Outdoor Program Secretary**

Newell/Leithead Field House: Open to Club Members. Clean/dry shoes only. Please No Street shoes, No glass bottles and No spitting on ground. Please do not rollerblade on the track. **Track Signs:** To ease the use of the track for walkers and runners, please be sure to follow the lane/direction assignment for walkers and runners which is located on the track. Please follow this regardless of how many people are on the track. **Children:** Children are required to be supervised at all times and are not permitted to horseplay to include running and yelling. **Children and adults are not permitted to climb or jump on mats or play in the sand pits.**

Outdoor Track/Sammis Outdoor Tennis: Open to Club Members and Community. Clean/dry shoes only. Please No street shoes, No glass bottles and No spitting on ground. Please do not rollerblade on the track or walk your dog inside the fenced area.

Athletic Fields: Not available for recreational use without prior approval. Please do not walk dogs on playing fields.

ID Badges: If an ID Badge is lost, stolen or damaged a \$20.00 replacement fee will apply to replace your card. This fee is paid to Security to cover replacement costs.

Call Fitness Center @ 229-7260 with questions or concerns

**St. Lawrence University – Fitness Club Waiver & Release Form
Stafford Fitness Center Programs/Multipurpose Room**

For and in consideration of being permitted to use the St. Lawrence University’s Athletic Facilities I, the undersigned, assume all risks in any way connected with or related to physical exercise and hereby agree to defend , indemnify , hold harmless and waive any and all claims which I may have arising out of theft or destruction of, or damage to personal property, personal injury, or death and release St. Lawrence University, it’s agents, servants, and employees from any liability whatsoever relating to my use of the St. Lawrence University facilities. For any membership which includes privileges for family use of these facilities, all terms and conditions of this Waiver and Release apply with equal force to all members of the family. I have read all the St. Lawrence University’s Athletic Rules and policies and hereby agree to follow them. I also acknowledge that failure to comply with these policies may result in loss of Fitness Center privilege.

By signing this Waiver & Release Form, I agree that I understand the risks of exercise, have no known physical limitations that would be made worse by exercise, have fully read, understand and agree to the terms and conditions.

Signature _____ Date _____
Print _____ Date _____

Signature _____ Date _____
Print _____ Date _____

Signature _____ Date _____
Print _____ Date _____

Signature _____ Date _____
Print _____ Date _____

Signature _____ Date _____
Print _____ Date _____