AQUAMOVES

Summer Family Pool Membership 2018 / 2019 Season

Responsible Person's Details:

Membership number: (staff use only)_		Date of Birth:		
Given Name:				
E-mail Address:				
Address:			Postcode:	
Contact Phone:	(A/H):	(B/H)		(Mobile)
Emergency Contact Name:		Relationship:		
Contact Phone:				(Mobile)

Family Member Details:

Given Name	Family Name	Date of Birth



	Membership Terms and Conditions				
1	The Summer Family Pool Membership is valid for the 2018/2019 period ending on 31 March 2019. The Summer Family Pool Membership provides unlimited access to Aquamoves' pools and Splash Park as well as access to the outdoor pools at Tatura, Mooroopna and Merrigum until their close in mid March. Persons 16 years and older may also access the spas, sauna, hydrotherapy pool and Aqua Aerobics Classes at Aquamoves. The membership is not limited to two adults and two children - available to all immediate family members.				
2	A membership may only be used by the person completing the Membership Application Form. Under no circumstance may a membership be shared. If a member is found to be sharing a membership then a centre ban will be enforced on all parties involved.				
3	Members and guests are required to wear wrist bands when using Spa, Sauna or Hydrotherapy facilities. The wrist bands will be fitted to customers' wrists at reception. Under no circumstances will bands be given to members to be fitted later.				
4	Suspension of memberships – Suspensions do not apply to this membership.				
5	Summer Family Pool Membership does not allow discounted rates for additional programs held at Aquamoves including, but not limited to, Swim School, 7 Week Challenge, Boot Camp and Extreme Measures.				
6	Refunds and cooling off periods – All requests for refunds within the first seven days of joining will be honoured in full, providing the facilities and services have not been used. If the membership has been used during the first 7 days then the applicable costs will be deducted from the refund entitlement. All terms and conditions of the membership are binding after seven days. After this time a refund will only be approved where: • A medical condition precludes further participation and a medical certificate is provided. • A refund will be calculated for the unused portion of the membership less a 20% administration fee. Management reserves the right to cancel or suspend a membership at any time and if so will refund any unused portion less 20% administration fee.				
7	Centre Rules - Members are required to abide by all centre rules and any requests by centre staff. Failure to abide by these rules will result in suspension or cancellation of membership.				
8	Members and guests are not permitted to conduct their own personal training or coaching sessions to other members and guests of the Centre.				
9	I acknowledge that during such times whilst on the centre's premises both my property and my person shall be at my own risk and I will not hold the centre or its instructors liable for any personal injury or loss of property, whether caused by negligence of the centre, its servants or agents. My (member) liability to indemnify the Centre (Aquamoves) shall be reduced proportionally to the extent that any act or omission of Centre (Aquamoves), its servants or agents, contributed to the loss or liability.				
10	I warrant that I am physically and medically sound to proceed with exercise. If at any time my physical status changes, I must inform Aquamoves staff.				
11	Aquamoves Management reserves the right to ask for a Medical Clearance.				
12	I acknowledge that I have read these 'conditions of membership' and agree to abide by these.				
13	Persons under the age of 16 are required to have the Membership Application form signed by their parent or legal guardian. The parent or legal guardian may be held responsible for any breaches of the membership terms and conditions. The parent or legal guardian may also be required to provide consent to enable the person to participate in physical activities, the emergency contact details on the front of this form must be completed for this purpose.				
14	Privacy Statement - The personal information contained in this document is to provide contact information/medical details for individuals wishing to use Aquamoves' facilities. This information may be disclosed to other areas of Aquamoves, Council, medical practitioners or other third parties should there be an issue or medical emergency, and in accordance of the Information Privacy Act 2000.				
I have read and understood the membership conditions stated and agree to abide by them.					
Mer	nber's Signature: Date:				
Receptionist's Signature:					