**ICRES GYM Membership Application form**

|  |
| --- |
| Please Paste Photo |

**Enrolment No.\_\_\_\_\_\_\_\_\_**

|  |  |  |  |
| --- | --- | --- | --- |
| Personal Information | Details | Emergency Contact List | Contact Details |
| Name: |  | Relative Name: |  |
| Signature & Date: |  |  |  |
| Employee ID: |  |  |  |
| Process/Department: |  | Supervisor Name: |  |
| User ID: |  | Supervisor email ID no. |  |
| Mobile No: |  |  |  |
| email Id: |  |  |  |

**GYM Timings**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Timings | Tick( Yes/ No) |  | Timings | Tick( Yes/ No) |
| 7:30 am to 8:30 am ( Mon-Fri) **Gents/Ladies** |  |  | 3.30 pm to 4.30 pm ( Mon-Fri) **Ladies** |  |
| 8:30 am to 9:30 am (Mon-Fri) **Ladies** |  |  | 4.30 pm to 6.30 pm ( Mon-Fri) **Gents/Ladies** |  |
| 9.30 am to 1.30 pm (Mon-Fri)  **Gents/Ladies** |  |  | 6.30 pm to 7.30 pm (Mon-Fri)  **Gents** |  |

**Undertaking**

I hereby certify that I have read the procedures & guidelines for the usage of Gym as per **ICRES Physical Access Control form & Annexure 01.**

I have fully understood the instructions and agree to abide. Having understood the same, I volunteer to use gym facilities.

**Signature** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Gym Member Health Card**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Personal Details**

Height\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Weight\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sex\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Enrolment No\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Employee No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail ID\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Contact No\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Personal Case History**

Smoking Yes/No If yes please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Drinks Yes/No If yes please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you Exercise Yes/No If yes please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Hereditary Illness Yes/No If yes please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Medical Profile**

Have you at any time suffered from any of the following aliment:

Arthritis Yes/No If yes please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Asthma Yes/No If yes please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chest Pain Yes/No If yes please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Varicose Veins Yes/No If yes please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Diabetes Yes/No If yes please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Epilepsy Yes/No If yes please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gall Stones Yes/No If yes please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Heart Attack Yes/No If yes please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rheumatism Yes/No If yes please specify…\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

High or Low BP Yes/No If yes please specify…\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Joint/Ligament problem Yes/No If yes please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you consuming any medication Yes/No If yes please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Disclaimer**

If the answer to any of these questions is YES, It may be advisable for you to check with your doctor as to your suitability for exercise. This is mainly for precaution. It will put your mind at ease on starting your exercise program.

I agree that the above answers are correct and I will not hold the Gym Service Provider/Company responsible for any injury as a result of my participation in these premises.

**Signature** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ICRES Physical Access Control form**

**For GYM Users**

**For User Only**

Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee ID \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Instruction**

1. Gym membership charges is Rs 350/per month
2. The gym membership fees will be deducted through the Pay roll every month
3. Associates who wish to join in between have to pay for the entire month
4. Membership is not transferable
5. Please adhere to gym timing
6. No food/drinks (expect water) are allowed
7. Re-rack weights equipments to the original place
8. Do not drop/slam weights as it can cause injury to yourself or others and can also damage the equipments
9. Always be courteous and respectful to others

**Dress Code**

1. Full-length shirt / T-Shirt
2. Athletic pants/shorts
3. Athletic, non-marking shoes
4. Employee should carry towel
5. Proper fitness attire is required. No boots, Street shoes sandals, or barefoot

**For ICRES Physical Security only**

Verified by

Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Physical Access to Gym**

Start Date\_\_\_\_\_\_\_\_\_\_\_\_\_ End Date \_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Annexure 01.**

**Gym Etiquette**

1. **30 minute time limit** on treadmill during peak hours or while others are waiting. Do not hog the machines.
2. **Please keep the weights and dumbells in their respective stands**. By not stashing them into where they belong, you not only inconvenienced others having to look for the weights, you are also creating possible accident situations.
3. **Please maintain self-hygiene.** Keep yourself neat and clean at all times. Please wear clean attires during workout, Being in an enclosed area, you may really stink.
4. **Always consult the trainer/instructor for tips and suggestions.** Do not tell other people what to do even if their lifting form is wrong unless you are asked for your opinion. Dishing out unsolicited advice will simply bruise their ego.
5. **Do be aware that the gym equipments are for all to share.** When resting before your next set, do not rest on the machines or sitting on the benches. Others will want to use them while you are resting between sets.
6. **Don’t drop the weights on the floor and damage the floor.** Treat the weights and machines with tender loving care. Why damage the equipments and irritate other people at the same time. If you cannot control the weights, then the weights are probably too heavy for you anyway.
7. **Please use a clean towel to wipe your sweat.** If you are sweating profusely, wipe your sweat. It is unhygienic to have your sweat dripping everywhere. It is even use the weight stations and leaving your puddles on benches and seats. Clean up your sweat residue on the equipments all the time.
8. **Please maintain a proper queue while using any equipment.** Someone may feel their egos getting hurt.
9. **Please carry your Gym clothes back home.** Dropping them in the changing room gives bad odour.
10. **Please follow proper dress code in the Gym.** Working out in the gym in your formals is really inconvenient. Consult the trainer/instructor for proper dress code.
11. **Do not disturb others.** Refrain from yelling, using profanity, banging weights and making loud sounds. Focus on your own workout and allow others to do the same.