

# Federal Fitness Center

Wallace F. Bennett Federal Building Room 1005  
125 South State Street  
Salt Lake City, Utah 84138

## Application Form

Last Name \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Primary Phone \_\_\_\_\_ Email \_\_\_\_\_

Employed By \_\_\_\_\_ Work Phone \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

### Select Membership Type:

Individual:	\$10.00 Monthly <input type="checkbox"/>	\$100.00 Annual <input type="checkbox"/>
Family:	\$15.00 Monthly <input type="checkbox"/>	\$150.00 Annual <input type="checkbox"/>
Shower Only:	\$5.00 Monthly <input type="checkbox"/>	\$50.00 Annual <input type="checkbox"/>

### Exclusive Use Locker Rental:

Locker rental inside locker room:	\$6.00/month:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Locker use <b>outside</b> locker room:	Free:	Yes <input type="checkbox"/>	No <input type="checkbox"/>

**\*\* Lockers inside locker room are available for day-use for free. Purchasing exclusive use allows you to place a combination/key lock on any locker on the bottom row.**

### Select Payment Method:

PayPal   
Auto-pay from your AFEF Credit Union Account

PLEASE READ AND SIGN THE REVERSE OF THIS FORM



# WAIVER AND INFORMED CONSENT FORM

I, \_\_\_\_\_, being at least 18 years of age, understand that participation in the exercise opportunities and programs offered or sponsored by the Federal Fitness Center (FFC) will require some degree of physical exertion above that normally experienced during my every day activity and that some medical risks, including serious injury or death, may be associated with such exertion.

I understand that it is advisable for inactive persons, especially those 35 years of age and older, to consult a physician and undergo a thorough physical examination before beginning an exercise program. I am also aware that persons with risk factors such as, but not limited to, the following should receive medical clearance from their physician before joining FFC:

- Family History of Heart Disease to age 50
- Stressful Occupation and Lifestyle
- Pregnancy
- Coronary Problems
  - Abnormal EKG
  - Mitral valve prolapsed
  - Heart murmur
  - Angina
  - Atherosclerosis
  - Obesity
  - Diabetes
  - Smoking habit
  - High cholesterol
  - High blood pressure
  - Sedentary lifestyle

I certify that I have read this Waiver and Informed Consent Form and that I am physically able to participate in the exercise opportunities and programs offered or sponsored by FFC.

I recognize that my use of the FFC facilities and my participation in the exercise opportunities and programs offered or sponsored by FFC is fully voluntary on my part, and I assume the risk for my behavior or any injuries occurring as a result of such use or participation.

In consideration for the privilege of utilizing the facilities, services, and equipment provided by the FFC, I agree to release, discharge, hold harmless, and indemnify the Federal government, Federal Fitness Center Committee, and FFC, and any trustees, officers, employees, management, staff, members, volunteers, or agents of said entities, from any liability, claims, demands, actions, and causes of actions whatsoever including, but not limited to, negligence, gross negligence, or breach of warranty, for any loss, claim, injury, illness, or harm of any kind or nature occurring to me, my family, estate, heirs, or assigns arising out of my use of the FFC facilities or my participation in the exercise opportunities or programs offered or sponsored by the FFC.

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Signature

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Date