

Email/courriel : reccenterstaff@westnipissing.ca

## Membership Application Form Formulaire de demande d'adhésion

Please send the completed Application Form to <a href="RecCenterStaff@westnipissing.ca">RecCenterStaff@westnipissing.ca</a>
Veuillez envoyer le Formulaire de demande rempli à RecCenterStaff@westnipissing.ca

Information /	' In	torm	ations	genei	rales
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Last name / Nom de Famille		First Name/ Prénom	
Address/Adresse	City/Vi	lle	Postal Code/Code postal
E-mail/ Adresse courriel		Telephone (home) / Téléphone (d	omicile)
Telephone (work/cell) / Téléphone (cellulaire/travail)		Date of Birth (YYY/MM/DD) /Date	de naissance (AAA/MM/JJ)

## Emergency Contact / Contact en cas d'urgence

	<b>O</b>
Last name / Nom de Famille	First Name/ Prénom
Telephone (home) / Téléphone (domicile)	Telephone (work/cell) / Téléphone (cellulaire/travail)
Relationship/ Relation	

I hereby certify the information provided in this application to be accurate and complete. I understand that my personal information included in my application is collected solely by the Municipality of West Nipissing for the purpose of administration and security. By signing below, I consent to the collection, use and necessary disclosure of my personal information for these purposes.

Je certifie par la présente que les informations fournies dans cette demande sont exactes et complètes. Je comprends que mes renseignements personnels inclus dans ma demande sont recueillis uniquement par la Municipalité de Nipissing Ouest à des fins d'administration et de sécurité. En signant ci-dessous, je consens à la collecte, à l'utilisation et à la divulgation nécessaire de mes informations personnelles à ces fins.

Signature (18 years or older/18 ans ou plus)	Date
Name of parent or guardian/Nom du parent ou tuteur	Signature of Parent or guardian/ du Parent ou tuteur
Date	



# WEST NIPISSING COMMUNITY & RECREATION CENTRE FACILITY RULES AND REGULATIONS

## Entering the facility

- Please perform a COVID-19 self-assessment at home or before attending the Recreation Centre.
   Do not attend or enter the facility if you have a new or worsening cough, fever, or feel generally unwell.
- You will be required to fill out a *Physical Activity Readiness Questionnaire* (PAR-Q) before your first visit to the Recreation Centre. The PAR-Q will be updated annually.

## In the Change Room

- Lockers are available to store your personal belongings. You must supply your own lock and remove all items and your lock at the end of your visit. Locks left at the end of the day will be cut off by maintenance staff.
- Showers are available for use.
- Curtained-off changing areas are available.
- A Family Change Room and Barrier Free Change Room are available for use.

#### Fitness Centre Dress Code

- Clean, dry clothing must be worn.
- A shirt must be worn at all times.
- Dry, closed-top athletic shoes must be worn at all times. Bare feet/ socks are not permitted for safety reasons.
- Absolutely **NO outside shoes** permitted.

#### Pool Dress Code

- Appropriate bathing attire must be worn when at the pool.
- Cotton t-shirts and shorts, as well as jeans and boxer shorts are NOT permitted.

## At the Fitness Centre

Before attending the Fitness Centre, participants must read and agree to the Code of Conduct.
 Failure to adhere to the Code of Conduct will result in the suspension or cancellation of your membership privileges.



#### At the Pool

- Admission Standards for the pool are in effect at all times.
- Swimmers aged 6 years of age and under will be issued a **RED WRISTBAND** and must be accompanied by a parent/guardian in the water, within arms-reach, at all times
- Swimmers aged 7-10 years of age will be issued a YELLOW WRISTBAND and must be accompanied by a parent/guardian in the pool enclosure (on the pool deck or in the water).
- To access the deep area of the pool, swimmers must complete a facility swim test administered by the lifeguard on duty and will be issued a **GREEN WRISTBAND.** Swim tests will be issued at the discretion of the Leaf Lifeguard on duty.
- Please note that one guardian can supervise up to two swimmers under the age of 7. Guardians must be 16 years of age or older.
- Swimmers may bring their own equipment to use while in the pool; however, all applicable safety rules must be followed.
- Lifejackets are available for use at the pool on a first-come, first-served basis.
- The use of goggles is encouraged while in the pool. You must supply your own goggles.
- The waterslide and Tarzan rope are currently not available for use.
- Parent & Tot Swim is reserved for parents/guardians with a child aged 7 years and under.
- Bullying, intimidation, threats or physical violence will not be tolerated at any time and will
  result in immediate expulsion from the facility and a revoking of all future pool privileges.
- The lifeguards have the authority to enforce all regulations.

## Facility Usage

- Patrons are required to register their visits to the Pool ahead of time. Registration can be made at any time by phone or in-person for that 6-day operation week (Monday Saturday).
- Members attending the Fitness Centre are not required to pre-book their session.
- All membership documents and waivers must be completed before accessing facilities.
- Visit <u>westnipissing.ca</u> for the most up to date programming schedule.

## Cancellation Policy

Failure to adhere to the rules and regulations may result in a cancelation of your membership or
expulsion from the facility. A reminder that you are on camera at all times when you are using
the Fitness Centre. These regulations are subject to change; the Municipality of West Nipissing
reserves the right to make amendments at any time.



# WEST NIPISSING COMMUNITY FITNESS CENTRE CODE OF CONDUCT

Failure to adhere to the following rules may result in a cancellation of your membership or expulsion from the facility. Please be advised that you are always on camera when using the Fitness Centre.

## Age Limit

- Patrons must be at least 16 years of age or older to use the Fitness Centre unaccompanied.
- Patrons aged 14 to 15 years of age must have a facility waiver signed by a parent/ guardian and be accompanied by a person aged 16 years or older, when using the weight room. Valid proof of age from both parties will be required at the time of admittance.

## Equipment Use

- All equipment, weights and accessories, must be returned to their proper location following use. Failure to do so, will result in loss of weight room privileges.
- Dropping or slamming dumbbells, weight plates or weight stacks is STRICTLY PROHIBITED.
- Wipe down all equipment following use with the cleaning solution/ paper towels provided.
- Sitting on machines between sets is not permitted.
- To start the treadmill, place your feet securely on the machine's side rails not on the track.
- Limit cardio equipment use to 30 45 minutes.
- Weights and/or dumbbells are not permitted to be used while on cardio equipment.

## **Dress Code**

- Dry, closed top athletic shoes must be worn at all times. Bare feet/socks are not permitted for safety and sanitary reasons.
- Absolutely **NO outside shoes.**
- CLEAN, dry clothing must be worn at all times.
- For sanitary reasons, a shirt must be worn in the weight room.



## Etiquette

- Personal belongings are not to be stored on the gym floor. All bags, purses, outside shoes etc. must be left in the change rooms.
- The recording of video or taking photographs of other patrons in the gym is strictly prohibited.
- Refrain from shouting while in the weight room. Vulgar language and profanity will not be tolerated at any time.
- Training clients and/or hosting classes is not permitted in the weight room, unless authorized in writing by staff.
- Any damage to equipment must be reported to staff immediately. Gym users must adhere to any "out of order" signs placed on equipment.
- The gym may only be used during posted hours and must be vacated immediately at time of closure.
- Should an emergency alarm or power failure occur while in the Fitness Centre, the location must be vacated immediately.
- Patrons using the gym must always be respectful to each other and staff. Bullying, intimidation, threats or physical violence will not be tolerated at any time, and will result in immediate expulsion from the facility and a revoking of all future gym privileges.

I hereby agree to the West Nipissing Community Fitness Center Code of Conduct and understand that failure to adhere to the preceding document may result in expulsion and/or suspension from the facility as well as loss of membership:

Print Name:	Date:	_
Signature :		
Staff Initial:		

Physical Activity Readiness Questionnaire - PAR-Q (revised 2002)

# PAR-Q & YOU

## (A Questionnaire for People Aged 15 to 69)

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 they start becoming much more physically active.

If you are planning to become much more physically active than you are now, start by answering the seven questions in the box below. If you are between the ages of 15 and 69, the PAR-Q will tell you if you should check with your doctor before you start. If you are over 69 years of age, and you are not used to being very active, check with your doctor.

Common sense is your best guide when you answer these questions. Please read the questions carefully and answer each one honestly: check YES or NO.

YES	NO		
		1.	Has your doctor ever said that you have a heart condition <u>and</u> that you should only do physical activity recommended by a doctor?
		2.	Do you feel pain in your chest when you do physical activity?
		3.	In the past month, have you had chest pain when you were not doing physical activity?
		4.	Do you lose your balance because of dizziness or do you ever lose consciousness?
		5.	Do you have a bone or joint problem (for example, back, knee or hip) that could be made worse by a change in your physical activity?
		6.	ls your doctor currently prescribing drugs (for example, water pills) for your blood pressure or heart condition?
		7.	Do you know of <u>any other reason</u> why you should not do physical activity?

## lf

## you

## answered

## YES to one or more questions

Talk with your doctor by phone or in person BEFORE you start becoming much more physically active or BEFORE you have a fitness appraisal. Tell your doctor about the PAR-Q and which questions you answered YES.

- You may be able to do any activity you want as long as you start slowly and build up gradually. Or, you may need to restrict your activities to those which are safe for you. Talk with your doctor about the kinds of activities you wish to participate in and follow his/her advice.
- Find out which community programs are safe and helpful for you.

## NO to all questions

If you answered NO honestly to  $\underline{\text{all}}$  PAR-Q questions, you can be reasonably sure that you can:

- start becoming much more physically active begin slowly and build up gradually. This is the safest and easiest way to go.
- take part in a fitness appraisal this is an excellent way to determine your basic fitness so
  that you can plan the best way for you to live actively. It is also highly recommended that you
  have your blood pressure evaluated. If your reading is over 144/94, talk with your doctor
  before you start becoming much more physically active.



#### **DELAY BECOMING MUCH MORE ACTIVE:**

- if you are not feeling well because of a temporary illness such as a cold or a fever — wait until you feel better; or
- if you are or may be pregnant talk to your doctor before you start becoming more active.

**PLEASE NOTE:** If your health changes so that you then answer YES to any of the above questions, tell your fitness or health professional.

Ask whether you should change your physical activity plan.

Informed Use of the PAR-Q: The Canadian Society for Exercise Physiology, Health Canada, and their agents assume no liability for persons who undertake physical activity, and if in doubt after completing this questionnaire, consult your doctor prior to physical activity.

#### No changes permitted. You are encouraged to photocopy the PAR-Q but only if you use the entire form.

NOTE: If the PAR-Q is being given to a person before he or she participates in a physical activity program or a fitness appraisal, this section may be used for legal or administrative purposes.

"I have read, understood and completed this questionnaire. Any questions I had were answered to my full satisfaction."

NAME	
SIGNATURE	DATE
SIGNATURE OF PARENT or GUARDIAN (for participants under the age of majority)	WITNESS

Note: This physical activity clearance is valid for a maximum of 12 months from the date it is completed and becomes invalid if your condition changes so that you would answer YES to any of the seven questions.