

Fit For Life Fitness Center & Physical Therapy

Key Tag # _____

DBA: Fit For Life (FFL)

575 75th Ave, St Pete Beach, FL 33706

(727) 367-0075

MEMBER INFORMATION (Please Print Clearly)

Last Name: _____ First Name: _____ Birth Date: _____ Gender: _____

Address: _____ City: _____ State: _____ Zip: _____

Secondary Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____ Phone: _____

Emergency Contact Name: _____ Contact Phone: _____

How did you hear about us?

- Friend/Family
- PT/DR. Office
- Internet (google)
- Door Flyer
- Hotel
- Other _____

Florida Residency

- Full-time
- Part-time

MEMBERSHIP DISCLOSURES & AGREEMENT

Mb Type: EFT 3-Months 6-Months Mb Start Date _____ Mb End Date _____

Mb Price: \$ _____ + tax \$ _____ Total: \$ _____ Key Tag Fee: \$ _____ SS Fee: \$ _____

Payment: Cash Check Credit Card CC # _____ - _____ - _____ - _____ Exp ____/____/____ CCV _____

Monthly EFT Payment: \$ _____ Monthly EFT Date: ____/____/2015

EFT Authorization: I authorize FFL and or its assigns to electronically deduct my monthly dues, taxes and any other fees according to the payment method above. This EFT authorization may be cancelled by the member upon written notice to FFL by the 15th of the month. Cancellation will be effective the next billing cycle. **I UNDERSTAND THAT THERE WILL BE A \$30.00 CHARGE FOR ALL NON-SUFFICIENT TRANSACTIONS OR DECLINES OF ANY REASON.**

Member agrees to the terms and conditions set forth by FFL _____ **Initials**

WAIVER: It's expressly agreed that all use of the facilities including seminars & specialty programming shall be undertaken by a member at his or her sole risk, and FFL shall not be liable for any injuries or damage to any member or guest, or the property of any member or guest, or be subject to any claim, demand, injury, or damages whatever, including without limitations those damages resulting from acts of passive negligence on the part of FFL its successors or assign, as well as its officers and agents, for such claims, demands, injuries, damages, actions or causes. It is specifically agreed that FFL shall not be responsible or liable to member or their guests for articles lost or stolen at FFL. _____ **Initials**

My Signature on the Face of This Document Indicates I Have Read, Understand, and Agree With the Statements and Information Contained on Both Sides.

Signature of Member

Date

Signature of Club Representative

Date

1. This is a membership agreement, which entitles, "Member" to use the exercise equipment, lockers, bathrooms and showers at Fit For Life.
2. The membership is not transferable. This is not a lifetime or perpetual membership. Identification is required upon entry to Fit For Life which is provided by Fit For Life.
3. **The member may cancel the membership within 3 days, exclusive of weekends or holidays, of its making, upon the mailing or delivery of written notice to Fit For Life and receive a refund of all payment made. A refund shall be issued within 30 days after receipt of the notice of cancellation made within the 3-day provision.**
4. **The member may cancel the contract and receive a refund if Fit For Life goes out of business, moves its facilities more than five (5) miles from above address or fails to provide, within 30 days, a facility of equal quality, at no additional cost to the purchaser. Notice of intent to cancel by the member shall be given to Fit For Life in writing. If Fit For Life wishes to enforce the contract after receipt of such showing, Fit For Life may request the Department of Consumer Services to determine the sufficiency of the showing. If the Department of Consumer Services determines that a refund is due the member a refund shall be computed by dividing the contract price by the number of weeks in the contract term and multiplying the result by the number of weeks remaining in the contract term. Fit For Life shall not be deemed out of business when temporarily closed for renovations of the premises: (a) upon sale, for not more than 14 consecutive days and, (b) during ownership, for not more than 7 consecutive days, and not more than 2 periods of 7 consecutive days in any calendar year. Should Fit For Life go out of business, contact the Department of Agriculture, State of Florida within 60 days.**
5. **A membership may be cancelled if a member dies, or becomes physically unable to avail a substantial proportion of the services they used from the commencement of the membership until the time of the disability, with refund of membership at the time of the disability. A refund of membership payments made will be in the amount computed by dividing the contract price by the number of weeks remaining in the membership term. In order to receive a refund, the member or the member's estate must provide proof of disability/death by furnishing a certificate from a licensed physician. A physical disability sufficient to warrant cancellation of the membership by the buyer shall be established if the buyer furnishes to Fit For Life a certification of such disability by a physician licensed under Chapter 458, 459, 460 or Chapter 461 provided the diagnosis or treatments is within the physician's scope of practice.**
6. **Fit For Life is registered with the State of Florida as a Health Studio - Registration No. HS4910.**
7. Member agrees to follow club rules as promulgated from time to time. Violation of these rules may be cause for suspension or cancellation. Fit For Life at its sole discretion may at times provide different specialty services and aerobics programs. These services plus existing services may be discontinued at the option of Fit For Life, and rates, fees, hours, limitations, conditions and terms of operation may be changed at the sole discretion of Fit For Life. Fit For Life may charge for services and the services and the amount for services may change from time to time at the sole discretion of Fit For Life.
8. Fit For Life may cancel the membership without advance notice, or refund the membership payment made if the member fails to abide by the rules and regulations as seen by Fit For Life from time to time. This includes tampering with locks and locking mechanisms.
9. The "Paid in Full" membership shall not be for a period of more than 6 months. The membership may be renewed at the end of the term (3 or 6 months). The EFT membership may be cancelled at any time for any reason.
10. **All members using Fit For Life will be subject to recorded video surveillance and will be subject to criminal prosecutions for violation of any and all Federal, State, County and city laws while at Fit For Life. All members using Fit For Life during unstaffed hours with non-members will be subject to a \$50 fee for each non-member. All members using the facility must have Fit For Life ID and be willing to provide upon request of staff. Fit For Life ID replacement fee Key Tag \$5.**
11. Fit For Life urges all members to obtain a physical examination from their physician prior to use of any exercise equipment or participating in any exercise class. In recognition of the possible dangers connected with any physical activity, member hereby knowingly and voluntarily waives their right or cause of action of any kind whatsoever arising as the result of such activity from which any liability may or could accrue to Fit For Life, its officers, agents, employees or instructors.

_____Initials