

Winkler Senior Centre Basic Orientation and Fitness Room

Informed Consent Form

I the undersigned, do hereby acknowledge to undergo a basic orientation to access the fitness room at the Winkler and District Senior Centre Inc. in the Buhler Active Living Centre.

This Basic Orientation will be administered by a CSEP Certified Personal Trainer (CPT) and may include:

- Completing a Par-Q+ form with questions regarding my health.
- Using hydraulic strengthening machines or free weights.
- Using a recumbent bike or treadmill.
- Performing a series of stretches to enhance flexibility and prevent muscle soreness.

I understand that after completing a basic orientation I can have unsupervised access to the Fitness Room for which I assume any risks that may involve.

I understand that there are small but potential risks during physical activity (e.g., episodes of transient light headedness, loss of consciousness, abnormal blood pressure, chest discomfort, leg cramps, nausea), and that I willfully assume those risks.

This form must be completed, signed and submitted to the Winkler Senior Centre, along with the completed Par-Q+, at the time of the basic orientation. The form must be witnessed at the time of signing and the witness must be of the age of majority and independent of the organization administering the basic orientation. The CPT cannot be the witness.

I AGREE THAT I HAVE READ AND UNDERSTAND THIS DOCUMENT.

Printed Name of Client _____

Address: _____

Phone: _____ E-mail: _____

Signature of Client: _____

Date: _____

Printed Name of Witness: _____

Signature of Witness: _____

Date: _____

Your appointment for your Basic Orientation is: _____