



## MEMBERSHIP FORM

**New member** (please complete Sections 1, 2 & 3) **Renewing member** (please complete Sections 1 & 3)

1. MEMBERSHIP DETAILS						
Membership Start Date:	_// Expiry [			Date: / /		
Title: Mr/Mrs/Ms/Miss	First name:			ast name:		
Membership Term:	6 months (\$280)					
(all prices include GST)	12 months (\$450)					
	1 month (\$50) – Gym & Class Access					
	Casual entry (\$9.50 per visit)					
	AFTER HOURS ACCESS (\$50 per toggle)					
2. MEMBERSHIP DETAIL						
Sex: Male 🗆 Female		D.O.B: <u>/</u>	<u> </u>	_	Age: years	
Postal Address:						
Town:				Postcode:		
Telephone:	Home:					
	Work:					
	Mobile:					
Email:					-	
Do you consent to receive information from GSC via email? YES				YES / NO		
Emergency Contact Name:						
Emergency Contact Phon						
Have you used a gym bef				YES / NO		
3. ACKNOWLEDGEMENT I have read and agree to abide by the terms and conditions of membership listed on the						
reverse of this form:		e terms and d	onanio	ns of me	mbership listed on the	
Member signature:		Guardian signature: (where a		gnature: (where applicable)		
OFFICE USE ONLY – Se	e overpag	e				
Fees Received \$	Date	Date//		Receipt No:		
GymMaster Login Provided Y/ N		App Dow	App Downloaded: Y/N		Induction to sign in to Ap I	Date:
Keyless Entry: Y / N	Toggle N	Toggle Number:		Induc. To Gym Date:		
Pre Exercise Asses Comple						

Responsible Officer	Director Community Services				
Date Created:	December 2019		Version:	1.0	
Review Date	Version	Comments			
07/09/2021	1.2				

## **OFFICE USE ONLY**

Details accepted and understood: Signed:	Date:
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Entered in Gym Master? Y / N Date: \_\_\_\_\_

Sent to records:	Signed:	Date: