

Pulse Leisure Club
Informed consent, medical disclaimer and personal details

Full Name	
Date of Birth	
Contact Telephone Number	
Email Address	

Are you happy to receive email updates? (please circle) YES NO

Emergency Contact

Full Name	
Contact Telephone Number	

Do any of the following medical conditions apply to your health? (please circle Yes or No)

High blood pressure	YES	NO
Low blood pressure	YES	NO
Heart condition	YES	NO
Asthma	YES	NO
Fainting or dizziness	YES	NO
Major surgery in the last 18 months	YES	NO
Joint problems	YES	NO
Stroke	YES	NO
Diabetes	YES	NO
Epilepsy	YES	NO
Migraines	YES	NO
High cholesterol	YES	NO
Spine problems	YES	NO
Chest problems	YES	NO
Cancer	YES	NO
Are you pregnant?	YES	NO

If you have circled YES to any of the above, please give more information here:

COVID-19 Policy

If any of the following statements apply to you, you must refrain from entering or using any of Pulse Leisure Clubs facilities until you are safe to do so.

If:

- You are suffering from any COVID symptoms, no matter how small.
 - You have had contact with anyone with COVID symptoms.
 - Someone in your household is showing any COVID symptoms.

If you show any symptoms in the days following usage of Pulse Leisure Club please contact us immediately so we can begin the track & trace procedure.

Informed consent and Cancellation policy

I hereby state that all the information I have provided is true and completed to the best of my knowledge and that I will not hold Pulse Leisure Club, it's staff members or the Castle Green Hotel liable for any mishaps or injuries (physical or otherwise) which may arise from using the clubs facilities or when under instruction online, indoors or outdoors. I acknowledge and understand this document and that participating in an indoor or outdoor fitness class, personal training session, or exercising alone is entirely my own decision and therefore my own risk.

On behalf of myself and all the people I have legal relationships with, I release Pulse Leisure Club, it's staff members and the Castle Green Hotel from any and all liability for any injury or accident (physical/medical or otherwise), which may occur to me while I am a member or resident of the Pulse Leisure Club, or when attempting to use information or follow instructions I have received from the staff.

I agree to respect all COVID-19 regulations whilst using any of the facilities or services offered by Pulse.

I declare that I have read, understood, and agreed to the contents of this waiver in its entirety.

Signature:	
Print:	
Staff signature:	
Date:	