

SID JACOBSON JCC'S  
GERSHWIND/JACOBSON HEALTH + WELLNESS CENTER

# TEEN FITNESS CERTIFICATION COURSE

REQUIRED FOR ALL 13-15 YEAR OLDS

**Office Use**

Membership Associate: \_\_\_\_\_

Appointment Scheduled:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Complete: \_\_\_\_\_

## Member Profile

Date \_\_\_\_\_

Name \_\_\_\_\_ Sex ☐ M ☐ F

Member ID \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Home Number \_\_\_\_\_ Cell Number \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Special Considerations \_\_\_\_\_

## Medical History

1. Have you had surgery in the past 6 months? ☐ Yes ☐ No \_\_\_\_\_

2. Is there any reason that would not allow you to participate in a physical fitness program? ☐ Yes ☐ No \_\_\_\_\_

Member's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_



SJJCC.ORG

## Informed Consent

### WHAT IS THE TEEN FITNESS CERTIFICATION COURSE?

The Teen Fitness Certification course is taught and directed by a certified personal trainer, and is required for all teen members ages 13-15, **BEFORE** utilizing the fitness center.

This course is designed to ensure that all teen members are working out safely and effectively. Teens will learn about appropriate fitness center etiquette, using correct form, and the importance of warming up, cooling down, cardiovascular training, strength training, and flexibility and mobility work.

I, \_\_\_\_\_, for myself, my heirs and assigns, hereby release the Sid Jacobson JCC (its employees, board members, and contractors) from any claims, demands and causes of action arising from my participation in the Teen Fitness Certification program.

I hereby affirm that I have read and fully understand the above.

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Member's Signature

Date

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Parent's Signature

Date

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Trainer's Initials