

TEEN CERTIFICATION COURSE

The Teen Certification Course is required for all participants 13-15 years to use the Health + Wellness facilities at Sid Jacobson JCC.

Office Use

Membership Associate _____

Appointment Scheduled _____ / _____ / _____

Date _____ / _____ / _____ Complete _____

Member Profile

Name _____ Sex ☐ M ☐ F

Member ID _____ Date of Birth _____ Age _____

Home Number _____ Mobile Number _____

Email _____

Street 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 or Guardian's Signature _____ Date _____

What is the Teen Certification Course?

The Teen Certification Course is taught and led by a certified personal trainer and is required for all members ages 13–15 years before they may use the Health + Wellness Center, including the fitness floor, pool, and basketball courts. This course is designed to help teens develop the knowledge and skills needed to exercise safely, confidently, and effectively while using the facility and its equipment.

Teens will learn essential safety practices, as well as the rules and regulations for using the Health + Wellness Center. Participants will be introduced to proper fitness center etiquette and gain an understanding of the benefits and importance of warm-ups, cool-downs, cardiovascular exercise, strength training, and flexibility training. Instruction will also cover how to safely and effectively perform each type of training to support overall health and fitness goals.

Teens will be given both a written and practical test to ensure understanding of material and equipment. Upon successful completion of the course, participants will receive their membership ID fob, have their photo taken, and be authorized to access and utilize the Health + Wellness Center in accordance with facility guidelines.

Informed Consent

I _____, am participating in the Teen Fitness Certification Course. I understand that Sid Jacobson JCC requires my participation in order to use the Health + Wellness Center, and I hereby affirm that I am in good physical condition and do not suffer from any disability that would prevent or limit my participation in the Teen Certification program.

I _____, hereby grant permission, without reservation, to Sid Jacobson JCC to take photographs and/or sound/image/video recordings of me and to use for promotion of good will, public education, fundraising and/or promotional activities and other related activities of Sid Jacobson JCC, and I waive any right to inspect or approve the photograph(s), sound/image/video recordings or finished version(s) of works, including website and social media, incorporating the photograph(s) or sound/image/video recordings.

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

Member's Signature _____ Date _____

Parent's Signature _____ Date _____

Trainer's Signature _____ Date _____

*Brought to you by our **Gershwind/Jacobson Health + Wellness Center***



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