



(USE BLOCK CAPITALS)

WATFORD GRAMMAR SCHOOL FOR BOYS

WATFORD BOYS FITNESS – 6TH FORM STUDENT APPLICATION

| MEMBERSHIP DETAILS: | | | |
|--|---|-------------------------|----------------|
| Full Name: | | Form: | Date of Birth: |
| CONTACT DETAILS: | | | |
| Home Address: | | | |
| | | | Post Code: |
| School Email Address: | <i>(do <u>not</u> use personal email)</i> | | |
| Emergency Contact Name: | | | |
| Emergency Contact Number: | | Relationship to Member: | |
| PARENTAL CONSENT: | | | |
| <i>Please indicate with a tick:</i> <input type="checkbox"/> I hereby give permission for my son to use the Watford Boys Fitness <input type="checkbox"/> I am aware that the Watford Boys Fitness may be un-manned and that using the facilities will be at my son's own risk. | Parent Name: | | |
| | Parent Signature: | | |
| | Date: | | |
| STUDENT MEMBER'S DECLARATION: | | | |
| <p align="center">DECLARATION: <i>Please indicate with a tick in the boxes the following statements:</i></p> <input type="checkbox"/> YES I confirm that I have no health problems that prevent my use of the equipment provided at Watford Boys Fitness. <i>(If you are in any doubt, you must check with your GP before confirming with a tick.)</i> <input type="checkbox"/> YES I have read & understood the attached "Terms & Conditions of Membership" for Watford Boys Fitness. <input type="checkbox"/> YES I will not permit any unauthorised entry to the Watford Boys Fitness suite using my electronic entry card. | | | |
| Student Signature: | Dated: | | |

| FOR FINANCE OFFICE USE ONLY: | |
|--|--|
| SO Mandate: <input type="checkbox"/> Date Sent to Bank: | Added to Membership List: <input type="checkbox"/> Photo: <input type="checkbox"/> |
| 1 st Payment Received: <input type="checkbox"/> Date: | Gym Permission Added |
| Induction Completed <input type="checkbox"/> Date: | To Student Card: <input type="checkbox"/> Date: |