

# APPLICATION FORM MEMBERSHIP

2012



# HOB

## PERSONAL DETAILS

Surname	First name	Title
Date of Birth	Occupation	M / F
Phone (h)	Phone (w)	Mobile
Postal Address		
State	Postcode	Email

[PLEASE COMPLETE ALL SECTIONS]

## EMERGENCY CONTACT INFORMATION

Name	Relationship
Phone	Mobile
Doctor's Name	Contact Phone

## MEMBER DETAILS

Please tick your category

<input type="checkbox"/> UTAS Student / Senior / Pensioner / External Student
<input type="checkbox"/> UTAS Staff / UTAS Alumni
<input type="checkbox"/> Community

## OFFICE USE ONLY

Card No. Valid Y / N  
Card No. Valid Y / N

To help us continually improve our services please answer the following questions:

### How did you hear about Unigym?

Friends  UTAS Media  Unigym Website  Other (please specify)

### What activities or facilities have brought you to Unigym?

Les Mills Fitness Classes  Zumba  Circuit Classes  Yoga & Pilates  Spin  Pump  
 Cardio Equipment  Resistance Equipment  
 Tennis  Squash  Sports Hall  Dojo   
 Other (please specify)

### What time of the day are you most likely to visit?

6.00am to 9am  9am to 1pm  1pm to 4pm  4pm to 7pm  7pm to 9.30pm

### What day are you most likely to visit?

Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  Sunday

### What is the main reason you joined Unigym?

Cost of Memberships  Facilities  Friends  Opening Hours  Programs/classes available  Location (convenient)  
 Staff  Reputation  Other (please specify)

**MEMBERSHIP TYPES**

Your chosen option  A FIXED TERM, B DIRECT DEBIT/ONGOING MONTHLY, C UTAS SALARY SACRIFICE, D FACILITY MEMBERSHIP

<b>A. Fixed Term</b>	UTAS Student	Living Longer Living Stronger (LLLS)	UTAS Staff	Community Concession	Community
GOLD 12 Months	<input type="checkbox"/> \$748	X	<input type="checkbox"/> \$795	<input type="checkbox"/> \$842	<input type="checkbox"/> \$935
BRONZE 12 Months	<input type="checkbox"/> \$650	<input type="checkbox"/> \$400	<input type="checkbox"/> \$691	<input type="checkbox"/> \$732	<input type="checkbox"/> \$813
6 Months	<input type="checkbox"/> \$377	X	<input type="checkbox"/> \$400	<input type="checkbox"/> \$424	<input type="checkbox"/> \$471
3 Months	<input type="checkbox"/> \$256	X	<input type="checkbox"/> \$272	<input type="checkbox"/> \$288	<input type="checkbox"/> \$320
5 Session Pass	<input type="checkbox"/> \$60	<input type="checkbox"/> \$35	<input type="checkbox"/> \$65	<input type="checkbox"/> \$70	<input type="checkbox"/> \$80
10 Session Pass	<input type="checkbox"/> \$105	<input type="checkbox"/> \$70	<input type="checkbox"/> \$117	<input type="checkbox"/> \$122	<input type="checkbox"/> \$137

\* PLEASE READ GENERAL AND SPECIAL TERMS APPLICABLE TO YOUR MEMBERSHIP. 12 MONTH GOLD MEMBERSHIPS ENTITLE CARD HOLDERS ACCESS TO ALL FACILITIES WITH THE FOLLOWING CONDITIONS: SQUASH, TABLE TENNIS AND TENNIS COURT USE FOR THE GOLD MEMBER AND A GUEST (ADDITIONAL GUESTS WILL NEED TO PAY THE REMAINDER OF THE COURT HIRE).

<b>B. Direct Debit / Monthly Membership*</b>	UTAS Student	UTAS Staff	Community Concession	Community
Gold (12 Months)	<input type="checkbox"/> \$62.33	<input type="checkbox"/> \$66.25	<input type="checkbox"/> \$70.17	<input type="checkbox"/> \$77.92
Bronze (12 Months)	<input type="checkbox"/> \$54.17	<input type="checkbox"/> \$57.58	<input type="checkbox"/> \$61.00	<input type="checkbox"/> \$67.75

\* THESE PRICES ARE THE MONTHLY FEE. PLUS AN UP-FRONT JOINING FEE OF \$75. PLEASE CAREFULLY READ THE MONTHLY MEMBERSHIP DIRECT DEBIT SPECIAL TERMS AND CONDITIONS.

<b>C. UTAS Salary Sacrifice*</b>	Gold	Bronze	6 months	3 Months
Once-off Deduction	<input type="checkbox"/> \$795	<input type="checkbox"/> \$691	<input type="checkbox"/> \$400	<input type="checkbox"/> \$272
Fortnightly Payment Plan	<input type="checkbox"/> \$30.58	<input type="checkbox"/> \$26.58		

\* IS AVAILABLE FOR UTAS STAFF ONLY FOR A 3, 6 OR 12 MONTH MEMBERSHIP (ONCE OFF DEDUCTION) OR A PERPETUAL (ON-GOING) MEMBERSHIP. PLEASE READ THE SALARY SACRIFICE TERMS AND CONDITIONS. PERPETUAL MEMBERSHIPS WILL INCUR A \$75 ESTABLISHMENT FEE, TERM MEMBERSHIPS DO NOT INCUR THIS FEE.

<b>D. Facility Membership</b>	UTAS Student	UTAS Staff	Community Concession	Community
12 Month Facility Membership	<input type="checkbox"/> \$10	<input type="checkbox"/> \$10	<input type="checkbox"/> \$10	<input type="checkbox"/> \$10
1 Month Facility Membership	<input type="checkbox"/> \$10	<input type="checkbox"/> \$10	<input type="checkbox"/> \$50	<input type="checkbox"/> \$60

\* PLEASE READ GENERAL AND SPECIAL TERMS APPLICABLE TO YOUR MEMBERSHIP

**UNIGYM STAFF ONLY  
PLEASE TICK**

- New member       Renewing member
- Health screen completed  - Stage One completed and member notified of suitable exercise intensity  
 - Stage Two (if applicable) completed and member notified of suitable exercise intensity  
 Witness: \_\_\_\_\_ Date: \_\_\_\_\_
- Medical Clearance form given  Yes  No Date received \_\_\_\_\_
- Induction completed  Date completed \_\_\_\_\_
- Informed client about Clause 6 of Terms and Conditions.
- Client Given:    General TC Version 1.1       UTAS Staff STC Version 1.1       UTAS Student STC Version 1.1   
 Community Concession STC Version 1.1       Fixed Term STC Version 1.1       Session Card STC Version 1.1   
 Monthly Membership / Direct Debit STC Version 1.1       Facility STC Version 1.1
- Issued card to client.
- Have attached copy of relevant document or sighted discount cards.
- Client application: Accepted  Denied  Reason \_\_\_\_\_

I have answered the Health Screen honestly and to the best of my knowledge. I understand that if I exercise above the agreed intensity recommended to me by Unigym staff, that I do so at my own risk. I also acknowledge that have been provided with a copy of the terms and conditions applicable to my Unigym membership. I have been informed, and understand, that I should make myself aware of all applicable terms and conditions before signing up for membership, as I will be bound by them where I become a member. I specifically acknowledge that my attention has been drawn to the terms and conditions relating to responsibility for personal injury that I might suffer when participating in activities at Unigym.

SIGNATURE	DATE
-----------	------