



**COLUMBIA
BASIN RACQUET
CLUB**

LIVING STRONGER

FITNESS, AGING AND NEUROCOGNITIVE
FUNCTION.

OUR PERSONAL TRAINING DEPARTMENT IS
EXCITED TO ANNOUNCE A GROUP TRAINING
PROGRAM DESIGNED SPECIFICALLY FOR THE
AGING ADULT.

Research has shown that aerobic, strength and flexibility
training has a positive effect on cognition.

AGING IS NOT LOST YOUTH, BUT A NEW STAGE OF OPPORTUNITY & STRENGTH

Train with Us Today!



CBRC's Living Stronger Program will focus on:

Flexibility: This promotes healthy muscles, joints, proper posture & helps to avoid injury.

Aerobic & Strength: Aerobic is important to help maintain stamina & heart health. Strength training is crucial for everyday life & keeps bones strong.

Neuromotor: The "true functional fitness training". This incorporates skills such as balance, coordination, gait, agility and proprioceptive training.

LIVING STRONGER STARTS SEPTEMBER 10TH

Tuesdays & Thursdays 8:00am-9:00am
Cost is as low as \$54 a month.

LIVING STRONGER GROUP TRAINING CAN ALSO ACCOMMODATE PARTICIPANTS WITH ARTHRITIS, OSTEOPOROSIS/OSTEOPENIA, CARDIOVASCULAR DISEASE AND PARKINSON'S DISEASE.

WE ARE HERE TO HELP!

Start Date: _____

End Date: _____

CBRC LIVING STRONGER/ALLOY TEAM TRAINING AGREEMENT

Columbia Basin Racquet Club recommends that participants obtain a physician's examination prior to starting an exercise program.

POLICIES AND RULES:

Living Stronger, Foundations, Afterburn & Industrial Strength are all included monthly and the participant may attend unlimited sessions in a month. A functional movement screen must be completed prior to participation. A session begins at the agreed upon start time and lasts approximately 50-60 minutes. The member's signature is required at the beginning of each training session. The trainer will provide the sign-in sheet. The training is charged to the account monthly and represents a 30-day period. Training sessions do not carry over from month to month.

I agree that for the services of this program, I promise to pay \$_____ plus tax upon signing this agreement which entitles me to:

_____ 3 Month Agreement (\$69/per month); includes before and after body composition measurements.

_____ 6 Month Agreement (\$59/per month); includes before, halfway and after body composition measurements, plus 50% off of MYZONE heart rate monitor.

_____ 12 Month Agreement (\$54/per month); includes before, halfway and after body composition measurements, plus FREE MYZONE heart rate monitor.

All sessions will expire at the end of each month.

I understand that there are no cancellations or refunds and that the sessions are not transferable (initial to confirm agreement)_____. I UNDERSTAND THAT I MAY CANCEL THIS CONTRACT WITHOUT PENALTY OR OBLIGATION WITHIN THREE (3) BUSINESS DAYS FROM THE DATE OF SIGNING BY GIVING NOTICE BY MAIL OR IN PERSON AT COLUMBIA BASIN RACQUET CLUB IN WHICH CASE I WILL BE ENTITLED TO A FULL REFUND.

ASSUMPTION OF RISK: I, _____, assume any responsibility of and/all personal injury/damage which may be attributed to a program of physical exercise. I accept responsibility for requesting exercise assistance at Columbia Basin Racquet Club. To my knowledge, I do not have any limiting physical condition or disability which would interfere with an exercise program. I have been informed of the need for a physician's approval before participating in any exercise program. I am aware of the effect that taking any drugs or medications; including, but not limited to, alcohol, diet pills, cold medicine, tranquilizers, antidepressants, caffeine, beta blockers, diuretics, and anti-hypertensives, may have on exercise, especially heart rate, and I have discussed this with my doctor.

Clients Name _____ Membership # _____

Clients Email _____

Clients Signature _____ DATE _____

Parent/Guardian Signature _____ DATE _____

Received By _____ DATE _____

Please sign and return to the front desk. Attention Morgan Fewel.