Induction Form

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Member Name:_____ **Contact Number:**_____

The purpose of this gym induction is to ensure that you, as a fully paid member of the Koorda Kinetic Centre, are aware and understand the correct procedures when utilising the equipment and facilities within the Centre.

In the dual signing (instructor and applicant) of each section of this induction, you acknowledge that the correct use of the following equipment has been demonstrated and you have a sound understanding of the safe and appropriate use of each item of equipment. You acknowledge that you use the gym at your own risk, and that failing to utilise the equipment in the manner demonstrated may cause serious injuries and harm.

	Instructor	Applicant
Cardio Equipment		
Treadmill		
Elliptical		
Upright Bike		
Rowing Machine		
Strength Equipment		
Leg Press		
Leg Extension/Leg Curl Machine		
Chest/Shoulder Press Machine		
Lat/Row Machine		
Multi Press/Squat Rack		
Functional Trainer		
Dumbbells		
Fit balls		
Other		
Emergency Procedure		
Location of toilets and shower		
Location of first aid equipment		
Location of defibrillator		
Location of sanitising wipes		

INSTRUCTORS APPROVAL

I acknowledge that _____ (member name) has completed an induction to the Koorda Kinetic Centre and has a sound understanding of the appropriate use of all items of equipment within the facility.

Instructor Name:_____ Signature:_____

Member Signature: _____ Date:_____