

## CLIENT INFORMATION

NAME & SURNAME \_\_\_\_\_

ID NUMBER \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

PHONE (H) \_\_\_\_\_ PHONE (C) \_\_\_\_\_

ADDRESS \_\_\_\_\_

## PRE-SAUNA MEDICAL QUESTIONNAIRE

	YES	NO
1. Pregnant	<input type="checkbox"/>	<input type="checkbox"/>
2. History of any heart or cardiovascular condition including heart attack	<input type="checkbox"/>	<input type="checkbox"/>
3. High or low blood pressure	<input type="checkbox"/>	<input type="checkbox"/>
4. Unstable angina	<input type="checkbox"/>	<input type="checkbox"/>
5. Any medical condition that inhibits your ability to sweat (eg. Multiple Sclerosis, Anhidrosis)	<input type="checkbox"/>	<input type="checkbox"/>
6. Recent joint injury	<input type="checkbox"/>	<input type="checkbox"/>
7. Chronically hot/swollen joints	<input type="checkbox"/>	<input type="checkbox"/>
8. Fever / any other condition which makes you insensitive to heat	<input type="checkbox"/>	<input type="checkbox"/>
9. Skin condition. If "yes," details _____	<input type="checkbox"/>	<input type="checkbox"/>
10. Taking any medication. If "yes," details _____	<input type="checkbox"/>	<input type="checkbox"/>
11. Taking medication (diuretics, barbiturates, blood thinners, antihistamines, beta-blockers)	<input type="checkbox"/>	<input type="checkbox"/>
12. Ever diagnosed with any other medical condition? If "yes," which condition _____	<input type="checkbox"/>	<input type="checkbox"/>
13. If you answered "yes" to any of the above, have you consulted with your medical practitioner about using the Sauna?	<input type="checkbox"/>	<input type="checkbox"/>

## SAUNA AGREEMENT, CONSENT AND INDEMNITY

I have read and consent to the abovementioned rules for Sauna use. I have disclosed all relevant information.

I, on behalf of myself and any of my heirs, executors, representatives, or assignees, hereby indemnify, hold harmless and waive all claims or liabilities for injury, death, disease, damages of any kind sustained while on the premises, during the use of the Sauna and from any advice provided by an employee, independent contractor, or any representative of Proactive Fitness.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## FOR PARENTS/GUARDIANS OF A MINOR (under 18 and above the age of 16)

I, as parent/guardian with legal responsibility for the above minor child do consent and agree to his/her use of the Sauna as provided above and I grant consent on behalf of the minor child, myself, my heirs, assigns and next of kin. I release, indemnify and hold harmless Proactive Fitness, any employee, independent contractor, or any representative of Proactive Fitness from any and all liability as a result of my minor child's use of the Sauna.

Parent / Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

# SAUNA RULES

1. Sauna use by booking only. All bookings must be made by our Proactive reception team.
2. Session limit of 20 minutes.
3. Arrive, start and finish your Sauna session in time.
4. No persons under 16 years of age.
5. Shower before entering Sauna
6. Towel down prior to exiting the shower and walking over the tiled area to the Sauna.
7. A maximum of 4 persons inside the Sauna always.
8. Wear a bathing suit or appropriate clean sauna clothing.
9. Do not sauna in your used workout clothing.
10. Do not leave any item of clothing inside the Sauna.
11. Use a clean towel to wrap around you and to sit on.
12. No lying down on benches.
13. No exercise of any kind; including stretching permitted in Sauna.
14. Do not use the Sauna if you have a cold or any other illness.
15. No use of any oils or liquids of any kind allowed.
16. Only use the fresh clean water provided in our wooden bucket to gently splash onto hot rocks with the wooden ladle/spoon.
17. Remove all footwear prior to entering.
18. No water bottles of any kind permitted. Drink water prior to entering the Sauna.
19. No food or drink inside the Sauna ever.
20. No smoking or vaping.
21. No watches or jewellery.
22. Water from the wooden bucket only to be splashed very lightly and occasionally on to the hot rocks by using the wooden spoon provided. Do not pour large amounts of water onto the rocks as this will destroy the electrical elements and destroy the purpose of the Sauna. This is not a steam room this is a hot rock Sauna.
23. No cell phones or any other electronic devices allowed inside the Sauna.
24. Always keep conversations to a considerate volume level and be considerate of other users.
25. Discontinue use of the Sauna if you experience discomfort, dizziness, nausea, or heat exhaustion.
26. Certain and severe medical conditions will require a note of authorisation from your doctor prior to the use of the Sauna. Access to the Sauna is at the discretion of the owner (Mathew Browne).
27. Clients using any medications must consult a physician or pharmacist prior to the use of the Sauna.
28. Please consult your physician if you are in doubt of your ability to use the Sauna for health reasons.

**FAILURE TO ADHERE TO THE ABOVE RULES WILL RESULT IN AN IMMEDIATE EXPULSION FROM THE SAUNA AND YOU WILL NOT BE PERMITTED TO USE OR ENJOY THE SAUNA FACILITY AGAIN.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

