



# MEMBERSHIP

To apply for membership please complete all questions.

- ANNUAL MEMBERSHIP - £325
- ANNUAL RENEWAL - £275
- JOINT MEMBERSHIP - £450
- MONTHLY DIRECT DEBIT - £32 PER MONTH
- 6 MONTH MEMBERSHIP - £175
- 7 DAY TRIAL - £15

## Member Details: Please write in BLOCK CAPITALS

Full Name :

E-Mail :

Contact Number :

Postcode :

Date Of Birth :         (Must be 16 or over)

Signature : ..... Date : .....

Gender :   
 Male    
 Female    
 Other    
 Prefer not to say

## For Radley Sports Centre Staff:

Start Date :  Status :  Renewal  New Member

Card Number :  Signed (staff) : .....

To Do :  Payment  Update ACT  Update GloFox  Note Added on GloFox

The weights room and fitness suite is unsupervised; I agree to use the equipment in the proper and correct way as detailed on each machine. I am aware of my responsibilities to consult with my personal physician regarding my medical fitness to engage in exercise. I do hereby intend to be legally bound for myself and waive release of any and all rights and claims for damages I may have against the training facility. Radley College are unable to award refunds or membership extensions due to illness, injury or relocation.

**By signing this form I agree to my details being stored on the Glofox database. You may choose not to supply personal identification information, however this may prevent you from engaging in certain site related activities. You will not be opted in to receive any form of marketing from Glofox.**

[Direct debit cancellations must be made directly with your bank.](#)

**The College accepts no responsibility for personal injury, however caused whilst using this facility.**

Signature : ..... Date : .....

# PAR - Q FORM



To apply for membership please complete all questions.

Full Name :

Doctors Address :

Date Of Birth :         (Must be 16 or over)

Signature : ..... Date : .....

## Questions:

Has your doctor ever said that you have a heart condition and that you should only perform physical activity recommended by a doctor?	Yes : <input type="checkbox"/>	No : <input type="checkbox"/>
Do you feel pain in your chest when performing physical activity?	Yes : <input type="checkbox"/>	No : <input type="checkbox"/>
Have you experienced chest pain when NOT performing physical activity in the last month?	Yes : <input type="checkbox"/>	No : <input type="checkbox"/>
Do you lose your balance because of dizziness or have you lost consciousness recently?	Yes : <input type="checkbox"/>	No : <input type="checkbox"/>
Do you have any bone or joint problems such as arthritis, which could be aggravated through physical activity?	Yes : <input type="checkbox"/>	No : <input type="checkbox"/>
Is your doctor currently prescribing you medications for high blood pressure or a heart condition?	Yes : <input type="checkbox"/>	No : <input type="checkbox"/>
Currently, I do not exercise regularly. Do you agree with this statement?	Yes : <input type="checkbox"/>	No : <input type="checkbox"/>
Is there any reason why you should not participate in physical activity?	Yes : <input type="checkbox"/>	No : <input type="checkbox"/>

Reason :

If you answered yes to one or more questions or are concerned about your health, consult a physician before taking a fitness test or substantially increasing your physical activity. You should ask for a medical clearance along with information about specific exercise limitations you may have.

If you answered no to all the PAR-Q questions, you can be reasonably sure that you can exercise safely and have low risk of having any medical complications from exercise. It is still important to start slowing and increase gradually.

PLEASE NOTE: If your health changes so that subsequently you answer YES to any of the above questions, inform your fitness or health professional immediately. Ask whether you should change your physical activity or exercise plan.

If you are not feeling well because of a temporary illness, such as a cold or a fever, wait until you feel better to begin exercising. If you are or may be pregnant, talk with your doctor before you start becoming more active.

# Class Timetable

Time	Mon	Tues	Wed	Thur	Fri
8:15 - 9:00					Pilates
9:00 - 9:45		Aqua FIT			
9:15 - 9:45				FIT	FIT
10:15 - 10:45		FIT			
12:15 - 12:45	FIT				
17:30 - 18:00	FIT		FIT		
18:10 - 19:00	Circuits		Bodyburn	Dance FIT	
18:30 - 19:30		Yoga			

\*Please note that classes may not run during some school holidays.

Location	Class		
Sports Hall	Circuits	Bodyburn	
Fitness Suite	FIT		
Barker Gym	Yoga	Dance FIT	Pilates
Radley Primary	Classes in Barker Gym will move to Radley Primary or Sports Hall during exam periods. This may cause the time of class to vary.		

# Swim Timetable

Swim Sessions	Mon	Tues	Wed	Thur	Fri
<b>Morning Swim</b>	6:30 - 8:00		6:30 - 8:00		6:30 - 8:00
<b>Lunchtime Swim</b>	13:00 - 13:30	12:30 - 14:00	12:30 - 13:15	12:30 - 14:00	13:00 - 13:30
<b>Evening Swim</b>	18:00 - 19:00	18:00 - 19:00	18:00 - 19:00	18:00 - 19:00	18:00 - 19:00

Weekend Swim Sessions	Sat	Sun
<b>Lunchtime Swim</b>	13:00 - 14:00	12:30 - 13:30
<b>Evening Swim</b>	16:00 - 17:00	17:00 - 18:00

\* Radley College Staff members are permitted to bring their children to swim sessions marked in **RED**.

# Swim Timetable - From 1st May

Swim Sessions	Mon	Tues	Wed	Thur	Fri
<b>Morning Swim</b>	6:30 - 8:00		6:30 - 8:00		6:30 - 8:00
<b>Lunchtime Swim</b>	13:00 - 13:30	12:30 - 14:00	12:30 - 13:15	12:30 - 14:00	13:00 - 13:30
<b>Evening Swim</b>	18:00 - 19:00 18:00 - 20:30	18:00 - 20:30	18:00 - 19:00	18:00 - 21:00	18:00 - 19:00 18:00 - 21:00

Weekend Swim Sessions	Sat	Sun
<b>Lunchtime Swim</b>	13:00 - 14:00 13:00 - 14:00	12:30 - 13:30 12:30 - 13:30
<b>Evening Swim</b>	16:00 - 17:00	17:00 - 18:00 17:00 - 18:00

**\* Radley College Staff members are permitted to bring their children to swim sessions marked in **RED**. 3 single lanes will remain solely for members' swimming during these sessions.**

# Gym Opening Hours

During Term Time	Morning	Evening
Monday & Wednesday	06:30 - 13:00	15:30 - 21:00
Tuesday, Thursday, Friday	06:30 - 13:00	18:00 - 21:00
Saturday & Sunday	08:30 - 13:00	

Out of Term Time	All Day
Monday - Friday	06:30 - 21:00
Saturday & Sunday	08:30 - 17:00

## LOCAL DISCOUNT

10 % OFF

**topsport**  
(sportsgoods) Ltd

**JAVA & CO**  
coffee \* cake \* care

**PROOF**  
SOCIAL BAKEHOUSE

**Pedal** CYCLES  
**Power**

**fit** 2  
**run**

WITH YOUR RADLEY LEISURE CLUB CARD

# 2025 Term Dates

## JANUARY

Mo	Tu	We	Th	Fr	Sa	Su
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

## FEBRUARY

Mo	Tu	We	Th	Fr	Sa	Su
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28		

## MARCH

Mo	Tu	We	Th	Fr	Sa	Su
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
						31

## APRIL

Mo	Tu	We	Th	Fr	Sa	Su
1	2	3	4	5	6	
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

## MAY

Mo	Tu	We	Th	Fr	Sa	Su
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

## JUNE

Mo	Tu	We	Th	Fr	Sa	Su
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
						30

## JULY

Mo	Tu	We	Th	Fr	Sa	Su
1	2	3	4	5	6	
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

## AUGUST

Mo	Tu	We	Th	Fr	Sa	Su
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

## SEPTEMBER

Mo	Tu	We	Th	Fr	Sa	Su
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

## OCTOBER

Mo	Tu	We	Th	Fr	Sa	Su
	1	2	3	4	5	
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

## NOVEMBER

Mo	Tu	We	Th	Fr	Sa	Su
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

## DECEMBER

Mo	Tu	We	Th	Fr	Sa	Su
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

Dates in **Red** indicate when Radley is in term time.

# CONSENT FORM



RADLEY

Please read and sign the following consent form

**In order to provide you with the most effective instruction during your fitness classes, it may be necessary for the instructor to make physical adjustments to your posture, alignment, or technique. These adjustments will be done solely with the intent to enhance your safety and ensure you are performing exercises correctly.**

**Please read and sign the following consent form to acknowledge your understanding and agreement:**

**Purpose of Touch:**

I understand that during the fitness class, the instructor may use physical touch to make adjustments to my form, posture, or alignment to improve my technique and reduce the risk of injury.

**Safety and Professionalism:**

I understand that any touch used by the instructor will be done in a professional and respectful manner, with the primary goal of enhancing my performance and safety.

**Right to Withdraw Consent:**

I understand that I can withdraw my consent for physical adjustments at any time during the class, simply by notifying the instructor, without fear of any negative consequences or judgement.

**Health and Medical Conditions:**

I have disclosed any relevant medical conditions or injuries that may affect my ability to safely participate in fitness activities. I agree to inform the instructor of any concerns regarding touch or adjustments due to these conditions.

By signing below, I confirm that I have read and understood the above terms and agree to allow the instructor to make physical adjustments to my posture, technique, or alignment during the class. I understand that I can withdraw consent at any time during the class, and that my participation is voluntary.

After reading the above, please sign and date below

Full Name :

Signature : ..... Date : .....

**Thank you for your cooperation and understanding.**

This form is designed to ensure clarity and mutual respect between clients and instructors, while prioritising the client's safety and comfort throughout their fitness journey.