



Hello! On behalf of the Healthy Returns Program and the Employee Centres Steering Committee, I'd like to say how pleased we all are that you're considering membership in the Region's Employee Centres Program. Our Employee Centres offer convenient and affordable access to fitness facilities, providing employees with opportunities to attain/maintain a healthy lifestyle through physical activity. High quality equipment and a variety of exercise classes (led by certified instructors) meet the needs of all members. And, whether you're new to regular exercise or just new to our facilities, each Centre offers one-on-one consultation with an Employee Centre Consultant who is fully qualified to assess your needs and provide you with a personalized program.

Enclosed are all the forms you need to get started. Read them over, and once you've made the decision to become a member, simply complete them and return them as directed, via interoffice mail, to the appropriate Employee Centre Consultant. The Consultant will be in touch with you shortly!

<b>Employee Centre Location (Primary Membership)</b>	<b>Consultant – Mailing Address</b>
150 Frederick St. Kitchener	Lisa Yates; Employee Centre Coordinator c/o Human Resources 150 Frederick St. 3 <sup>rd</sup> Floor lblaskavitch@hotmail.com
99 Regina St. Waterloo	Terry Ford; Employee Centre Coordinator c/o 99 Regina St. designfitness@sentex.net
150 Main St. Cambridge	Terry Ford; Employee Centre Coordinator c/o 99 Regina St. designfitness@sentex.net
GRT - 460 Conestoga Blvd. Cambridge	Lisa Yates; Employee Centre Coordinator c/o Human Resources 150 Frederick St. 3 <sup>rd</sup> Floor lblaskavitch@hotmail.com
GRT - 250 Strasburg Rd. Kitchener	Lisa Yates; Employee Centre Coordinator c/o Human Resources 150 Frederick St. 3 <sup>rd</sup> Floor lblaskavitch@hotmail.com
Mannheim Water Treatment Plant 2069 Ottawa St. S. Kitchener	Terry Ford; Employee Centre Coordinator c/o 99 Regina St. designfitness@sentex.net
Operations Centre - 100 Maple Grove Rd. Cambridge	Lisa Yates; Employee Centre Coordinator c/o Human Resources 150 Frederick St. 3 <sup>rd</sup> Floor lblaskavitch@hotmail.com
Sunnyside Home - 247 Franklin St. N. Kitchener	Lisa Yates; Employee Centre Coordinator c/o Human Resources 150 Frederick St. 3 <sup>rd</sup> Floor lblaskavitch@hotmail.com
WRESTRC -1001 Erb's Rd. Waterloo	Terry Ford; Employee Centre Coordinator c/o 99 Regina St. designfitness@sentex.net

Mary Beth Beasley, RN COHN(C)  
Healthy Returns Program Coordinator

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## **Terms and Conditions of Membership**

Members are required to adhere to the terms and conditions of Employee Centre membership, as stated herein and to the posted rules governing the site(s) at which they are members. Infractions to the Terms and Conditions of Membership or posted rules may lead to the termination of membership.

1. Employee Centre Membership is available to permanent, temporary and part-time employees and elected officials of the Regional Municipality of Waterloo; individuals who are on Regional Payroll. The initial membership application applies to one (primary) Employee Centre. Upon establishment of primary membership, access to other Centres can be arranged through Human Resources upon request. Employee Centres are for the use of members only. There are no guest privileges.
2. Members wishing to cancel their membership must provide written notice to the Employee Centre Coordinator at their primary Centre, and must allow a minimum of 2 weeks for the cancellation to be processed. For permanent employees, no cancellation of membership will be accepted within the first 6 months, unless under extenuating circumstances (e.g. medical reasons) as per the recommendation of the Employee Centre Consultant and with the approval of the Employee Centre Site Committee. Those who have cancelled their membership are eligible to re-apply after 3 months.
3. Membership dues are paid by payroll deduction, except in the case of Casual employees who are required to pay in advance for a six-month membership. The rate for membership dues is reviewed annually by the Employee Centres Steering Committee.
4. Security, controlled access and emergency and safe use protocols are in place at each Employee Centre, but will vary from Centre to Centre. It is the member's responsibility to know and comply with the security measures and emergency protocols in place at the Employee Centre(s) they are accessing. A breach of security measures (e.g. lending access card to a non-member) may result in termination of the membership. For maximum security, members are advised against bringing valuables into the Employee Centre(s).
5. Lockers are provided at each Employee Centre for the convenience of members. Standards concerning the use of lockers will vary from Centre to Centre, and it is the member's responsibility to know and comply with the standards in place at the Employee Centre(s) they are accessing.
6. The Employee Centre Site Committee and The Employee Centres Steering Committee reserve the right to make reasonable changes to the Terms and Conditions of Membership from time to time. All members will be notified in advance of any changes.

### **Code of Conduct**

1. Members are required to sign-in each time they use the Employee Centre, using the book/sheet provided.
2. Access to Employee Centres must occur prior to or after normal working hours, or within the time allowed for meal break/lunch periods, or during usual morning or afternoon breaks ( to a maximum of 15 min. per break).
3. Proper exercise attire and appropriate footwear is required – shoes worn are to be for gym use only.
4. For their personal safety and security, members are advised to be familiar with and observe the Safe Use Protocols posted in each Centre.
5. It is each member's responsibility to keep Employee Centres clean, tidy and uncluttered. Members are expected to wipe down equipment after use, with the disinfectant and paper towels provided. Equipment (e.g. free weights/barbell weights) is to be returned to the appropriate storage racks when not in use. Gym bags are not permitted in work-out areas.
6. Members are responsible for reporting any concerns regarding the Employee Centre to the Employee Centre Consultant, either in person or in writing (space available on sign-in sheets). In the case of malfunctioning equipment, refer to the Safe Use Protocol posted in each Centre.
7. Should a employee member incur an injury while making use of Employee Centre facilities, the injury **MUST BE REPORTED** to the employee's supervisor as soon as is practically possible, with an incident/injury report (DOCS #848587, available in each Centre) completed and submitted as per the directions on the form.
8. Rough and/or disorderly behaviour in Employee Centres or improper use of equipment is not permitted.

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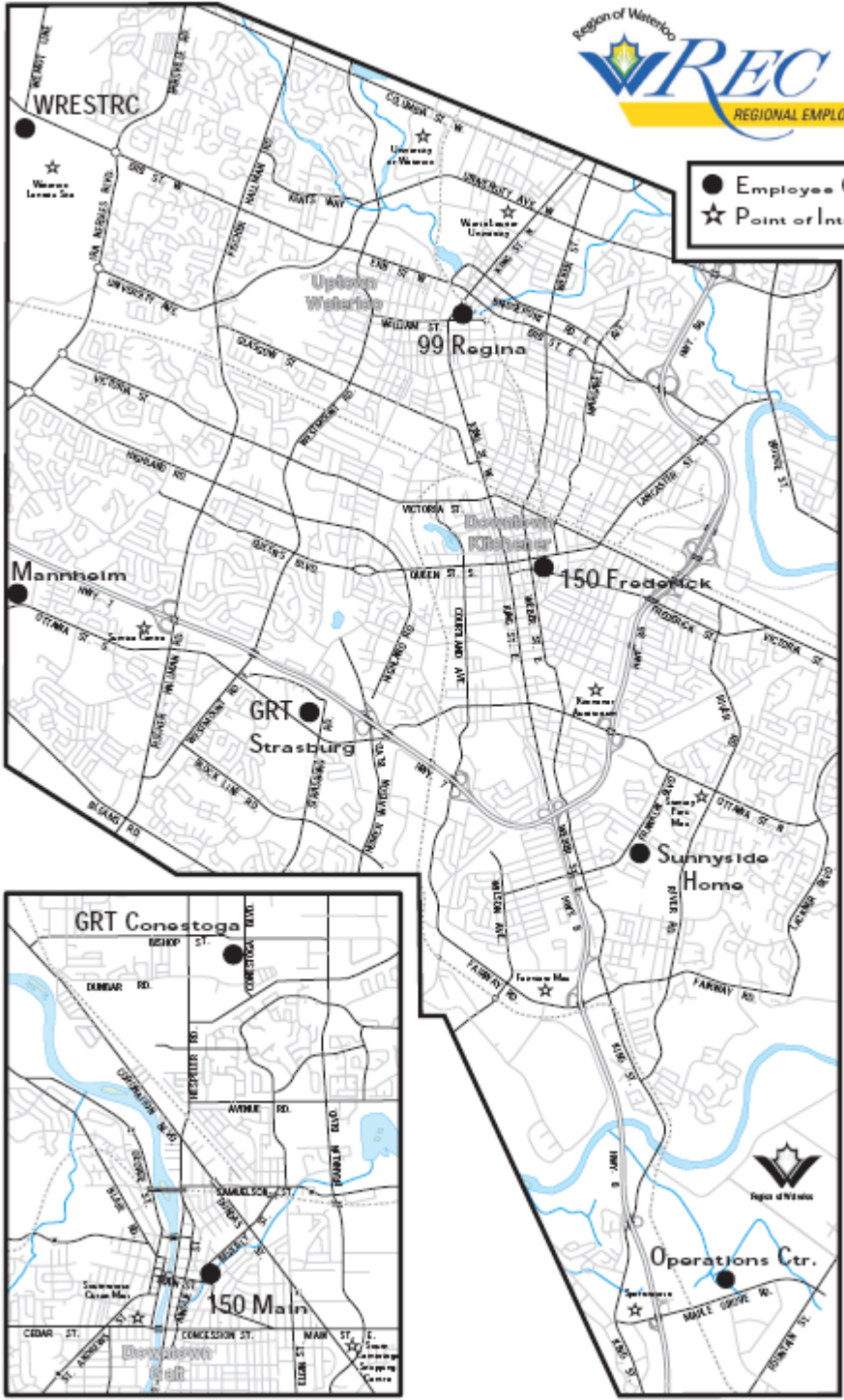
## ACCESSING EMPLOYEE CENTRES

Access to Employee Centres is permitted only during the Centres' posted operating hours. In order to ensure your safe use of these facilities, it is strongly recommended that you **do not work out alone**. Should you find yourself alone at an Employee Centre, you are required to comply with the following procedures;

EMPLOYEE CENTRE	PROCEDURE
150 Frederick St.	Notify the Building's Security Guard (519-575-4569) when you are alone and as you are leaving. The <b>Security Guard</b> is on site <b>Monday – Friday</b> , from <b>8 a.m. – 9 p.m.</b> Note that the Security Guard may be on patrol and take a few minutes to respond. When the Building's Security Guard is not available, implement your own check-in/check-out system by notifying a personal contact on arrival and departure.
99 Regina St.	Notify the Building's Security Guard (519-883-2260) when you are alone and as you are leaving. The <b>Security Guard</b> is on site <b>Monday – Friday</b> , from <b>8 am – 9 pm.</b> Note that he/she may be on patrol and take a few minutes to respond. When the Building's Security Guard is not available, implement your own check-in/check-out system by notifying a personal contact on arrival and departure.
150 Main St.	Notify the Building's Security Guard (519-740-5700 x7058) when you are alone and as you are leaving. The <b>Security Guard</b> is on site <b>Monday – Friday</b> , from <b>8 am – 6 pm</b> and <b>Saturday / Sunday</b> from <b>8:30 am -12:30 pm.</b> Note that he/she may be on patrol and take a few minutes to respond. When the Building's Security Guard is not available, implement your own check-in/check-out system by notifying a personal contact on arrival and departure.
Mannheim Water Treatment Plant	Notify Gate House personnel (519-575-4757 x1342) when you are alone and as you are leaving. The <b>Gate House</b> is <b>staffed 24 hours/day.</b>
Operations Centre	Notify the Building's Security Guard (519-650-8200) when you are alone and as you are leaving. The <b>Security Guard</b> (Dispatcher) is on site <b>24 hours, 7 days/week.</b> Note that the Security Guard may be on patrol and take a few minutes to respond.
WRESTRC	During <b>normal business hours</b> contact the Front Desk (519-883-4750 x1). <b>Outside normal business</b> hours, or in the absence of personnel at the Front Desk, implement your own check-in/check-out system by notifying a personal contact on arrival and departure.
Sunnyside Home	<b>Inform a colleague</b> that you are going to the Centre and advise them regarding your expected time of return. When you have completed your workout, check back in with the colleague.
GRT Strasburg Rd.	Notify the Fleet Office (519-585-7597 x7261) when you are alone and as you are leaving. The <b>Fleet Office</b> is <b>staffed 24 hours, 7 days/week EXCEPT from 12 – 7 a.m. on Sundays.</b>
GRT Conestoga Blvd.	Notify <b>Fleet office</b> personnel (519-623-5102) when you are alone and as you are leaving. The office is <b>staffed from 11:00 pm Sunday evening through 3:00am Saturday.</b> In the absence of personnel in the Fleet Office, implement your own check-in/check-out system by notifying a personal contact on arrival and departure.

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● Employee Centre  
 ☆ Point of Interest



CAMBRIDGE LOCATIONS

KITCHENER-WATERLOO LOCATIONS



## Membership Application Form (Primary)

New/Update Membership OR  Application to change Primary Location

from \_\_\_\_\_ to \_\_\_\_\_  
Location Location

Name (PRINT):		Male <input type="checkbox"/>	Female <input type="checkbox"/>
Department:	Location:	Employee #:	
Workplace E-mail Address:			
Home E-mail Address:			
Home Address:			
Telephone (Home):		Telephone (Business):	

Emergency Contact Name:	
Emergency Telephone (Home):	Emergency Telephone (Business):
Relationship to Employee:	
<b>NOTE:</b> All prospective members must complete a Physical Activity Readiness Questionnaire. An Employee Centre Consultant will contact you to arrange an Employee Centre Orientation.	

<b>Employment Status</b> (check one): <input type="checkbox"/> Perm. Full Time <input type="checkbox"/> Perm. Part Time <input type="checkbox"/> Temp. Full Time; end date _____ <input type="checkbox"/> Temp. Part Time; end date _____ <input type="checkbox"/> Student; end date _____ <input type="checkbox"/> Casual
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<b>Membership Fees</b> <b>(see over to indicate the Centre you will be using)</b>
<b>Payroll Deduction (please check only one):</b> <input type="checkbox"/> I am paid weekly, and authorize a payroll deduction of \$4 per pay for membership fees <input type="checkbox"/> I am paid bi-weekly, and authorize a payroll deduction of \$8 per pay for membership fees <p style="text-align: center; font-size: small;">*In cases where membership is being applied for prior to the opening of the applicant's primary Employee Centre, the applicant will be notified in advance re the start date for payroll deduction</p>

Employee Signature:
Date:

For Consultant Use Only:		
Facilities	Group Email List	Locker List
Payroll Deduction	Access Card	Report

**PLEASE SUBMIT THIS FORM AS PART OF YOUR APPLICATION  
 and RETAIN A COPY FOR YOUR OWN RECORDS**



## Membership Application Form (Primary)

### INSTRUCTIONS:

1. Choose the Employee Centre for which you are seeking access from the table below (*select one Centre only*).
2. Submit your membership application via interoffice mail, as indicated, to the appropriate Fitness Consultant.

Employee Centre Location	Hours of Operation	Consultant – Mailing Address
<input type="checkbox"/> 150 Frederick St. Kitchener	Monday – Friday 6 a.m. – 9 p.m.	Lisa Yates; Employee Centre Coordinator c/o Human Resources 150 Frederick St. 3 <sup>rd</sup> Floor lblaskavitch@hotmail.com
<input type="checkbox"/> 99 Regina St. Waterloo	Monday – Friday 6 a.m. – 9 p.m. Saturday hours vary – check class sched.	Terry Ford; Employee Centre Coordinator c/o Employee Centre 99 Regina St. designfitness@sentex.net
<input type="checkbox"/> 150 Main St. Cambridge	Monday – Friday 6 a.m. – 9 p.m. Saturday/Sunday 9 a.m. – 12 p.m.	Terry Ford; Employee Centre Coordinator c/o Employee Centre 99 Regina St. designfitness@sentex.net
<input type="checkbox"/> GRT – 460 Conestoga Blvd. Cambridge	Monday – Friday 24 hours Saturday/Sunday 9 a.m. – 6 p.m.	Lisa Yates; Employee Centre Coordinator c/o Human Resources 150 Frederick St. 3 <sup>rd</sup> Floor lblaskavitch@hotmail.com
<input type="checkbox"/> GRT – 250 Strasburg Rd. Kitchener	24/7 except Sunday, closed midnight – 7 a.m.	Lisa Yates; Employee Centre Coordinator c/o Human Resources 150 Frederick St. 3 <sup>rd</sup> Floor lblaskavitch@hotmail.com
<input type="checkbox"/> Mannheim Water Treatment Plant 2069 Ottawa St. S. Kitchener	24/7 for employees of Mannheim WTP 6 a.m. – 9 p.m. daily for all other ROW employees	Terry Ford; Employee Centre Coordinator c/o Employee Centre 99 Regina St. designfitness@sentex.net
<input type="checkbox"/> Operations Centre 100 Maple Grove Rd. Cambridge	24/7	Lisa Yates; Employee Centre Coordinator c/o Human Resources 150 Frederick St. 3 <sup>rd</sup> Floor lblaskavitch@hotmail.com
<input type="checkbox"/> Sunnyside Home 247 Franklin St. N. Kitchener	24/7 for employees of Sunnyside Home 6 a.m. – 9 p.m. daily for all other ROW employees	Lisa Yates; Employee Centre Coordinator c/o Human Resources 150 Frederick St. 3 <sup>rd</sup> Floor lblaskavitch@hotmail.com
<input type="checkbox"/> WRESTRC - 1001 Erb's Rd. Waterloo	24/7	Terry Ford; Employee Centre Coordinator c/o Employee Centre 99 Regina St. designfitness@sentex.net

3. You will be notified by the Employee Centre Coordinator regarding the status of your application.
4. Once your application has been successfully processed, you will be able to access the Employee Centre you have chosen, using your employee card.
5. Once your primary membership has been established, you may apply, in person, for access to other Employee Centre locations as required. Applications for multi-Centre access are available by going to Human Resources (3<sup>rd</sup> floor – 150 Frederick St.) during normal business hours.

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### **Informed Consent Agreement and Release of Liability**

In consideration of my use of the Employee Centre(s); its equipment and fitness related programs, I agree as follows:

#### **ASSUMPTION OF RISK**

I \_\_\_\_\_  
PRINT NAME

have read and understand the terms and conditions associated with this membership.

I understand that there exists a risk of injury through participation in sports and recreational activities. I understand that injuries may be minor or serious, and may result from my own actions or inactions, or the actions or inactions of others, or a combination thereof. I further understand that any injury that I incur while making use of Employee Centre facilities, **MUST BE REPORTED** to my Supervisor as soon as is practically possible.

I understand that any rules or regulations are for the safety and protection of participants and I agree to follow these rules and regulations.

I understand that the activities offered as part of the Employee Centres Program require a minimum level of fitness and health (physical, mental, emotional) and that each person has a different capacity for participating in these activities.

I am assuming responsibility for knowing how to use equipment safely, and for being physically fit in order to participate. Further, I am assuming responsibility for my decision and choice to participate, understanding that it brings with it risks and results.

#### **WAIVER**

I agree to waive any and all claims that I have or may have in the future have against the Regional Municipality of Waterloo and its elected officials, officers, employees, volunteers, contractors, agents and representatives, and their respective successors, assigns, heirs, administrators and estates (all of whom are hereinafter collectively referred to as the "Releasees") and to release the Releasees from any and all liability for any loss, damage, injury or expense that I may suffer, or that my next of kin may suffer, as a result of my use of the Employee Centres(s), its equipment and fitness related programs, due to any cause whatsoever, unless such loss, damage, injury or expense is caused solely by the negligence of the Releasees. I further agree not to make any claim or take any proceeding against any other person, partnership, firm, company, or entity of the Crown which may have the effect of causing a claim against Releasees in relation to any loss, damage, injury or expense that has been waived and released herein.

I agree to hold harmless and indemnify the Releasees from any and all liability for any property damage or personal injury to any third party resulting from my use of the Employee Centre, its equipment and fitness related programs.

This agreement shall be effective and binding upon my heirs, next of kin, executors, administrators, assigns and representatives, in the event of my death or incapacity.

I am aware that I may not be covered by Workplace Insurance during my use of the Employee Centre, its equipment and fitness related programs.

I have read, understand and agree to the provisions of the INFORMED CONSENT AGREEMENT AND WAIVER OF LIABILITY.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

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## Physical Activity Readiness Questionnaire\*

Name (PRINT) \_\_\_\_\_ Workplace Phone # \_\_\_\_\_

**\* If you are pregnant or become pregnant while an Employee Centre Member, you are required to contact the Employee Centre Coordinator at your Centre and complete a PARmed-X For Pregnancy Questionnaire**

1.	Has your doctor ever said that you have a heart condition and that you should only do physical activity recommended by a doctor?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.	Do you feel pain in your chest when you do physical activity?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.	In the past month, have you had chest pain when you're not doing physical activity?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.	Do you lose your balance because of dizziness or do you ever lose consciousness?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.	Do you have a bone or joint problem that could be made worse by a change in your physical activity?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.	Is your doctor currently prescribing drugs (for example, water pills) for blood pressure or heart condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.	Do you know of any other reason why you should not do physical activity?	<input type="checkbox"/> Yes <input type="checkbox"/> No

### NOTE

1. If you are not feeling well because of a temporary illness such as cold or fever, wait until you feel better before participating in a fitness class/activity.
2. If you are, or may be pregnant, talk to your doctor and the Employee Centre Coordinator before increasing your level of physical activity and see the Employee Centre Coordinator to complete a request a PARmed-X For Pregnancy Questionnaire
3. If you experience a change in your health such that your answers to any of the above questions change to "Yes", seek advice from your treating physician(s) and the Employee Centre Coordinator/Instructor(s).

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I have read and understood this questionnaire. If I answered "Yes" to any of the above questions, I understand that the Employee Centre Coordinator will require a note from my doctor before proceeding with my application for Employee Centre(s) membership. I acknowledge the need to accept my body's messages and to immediately inform the Employee Centre Coordinator and/or Instructor(s) of any pain, discomfort or fatigue that I may experience during and immediately following my participation in physical activity.

Signature of Participant \_\_\_\_\_ Date \_\_\_\_\_

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