

Fitness Center

Regis University

Notification of Risk

Dear Fitness Center User,

As a user of the Regis University Fitness Center, there is a possibility that exercising may pose a risk to your health and safety. If this pertains to you, the Fitness Center cannot allow you to exercise until you have a doctor's agreement that it is safe to do so.

The Health History form that follows is designed to assist Fitness Center staff in assessing your health risk status as well as providing a confidential record of your medical history should it be needed in an emergency.

If your Health History form indicates that you are at risk, then your personal health care provider must certify, in writing, your safety to exercise. Although this may cause an inconvenience for some, it is necessary to safeguard your health while using the Fitness Center.

By signing below, you acknowledge that you understand that there is a possibility for the need of a doctor's written permission to exercise, and that you will comply with the Fitness Center's policy.

Thank you for your cooperation.

Joe Giacalone, Director
Regis University Fitness Center

Signature: _____ **Date:** _____