



# CIVIL SERVICES OFFICERS' INSTITUTE

Vinay Marg, Chanakyapuri, New Delhi - 110021  
Tel. : 24195300, 26111090

Affix Passport  
size Latest  
Photograph  
here

Please submit two  
Photograph in  
addition

S. No.

## GYM / SPA APPLICATION FORM

Name ..... Membership No. ....

Date of Birth ..... Weight ..... Height .....

Sex ..... Age ..... Married / Single ..... Blood Group .....

Home Address .....

Office Address .....

Telephone No. (Off.) ..... (Res.) ..... (M.) .....

E- mail .....

### Purpose of using the facility :-

- |                         |                          |                       |                          |
|-------------------------|--------------------------|-----------------------|--------------------------|
| a) Weight Reduction     | <input type="checkbox"/> | d) Body Building      | <input type="checkbox"/> |
| b) Body Shaping         | <input type="checkbox"/> | e) Relaxation         | <input type="checkbox"/> |
| c) Improving Life Style | <input type="checkbox"/> | f) General Well Being | <input type="checkbox"/> |

### Health Profile :-

Heart Problem (Yes/No) .....

Blood Pressure Normal / .....

Diabities Level Normal / .....

Any pain in your Bones/Joints such as Arthritis etc. ? (Yes/No) .....

Are you under Medical advice to avoid stress related activities ? (Yes/No) .....

Any other issue you wish to highlight .....

.....

.....

Note : This questionnaire has been designed to identify any medical problem/special needs required by the member.

Duration (minimum three months) .....(3/6/9/12 months

Mode of Payment (Cheque/Cash) .....

Receipt/Voucher No. ....

Date .....

## RULES & REGULATIONS

### FEE STRUCTURE

1. GYM – Rs. 700/- per month (*minimum period of engagement is three months*) throughout the week (except Tuesday) for maximum two hours.
2. SPA – Rs. 700/- per month (*minimum period of engagement is three months*) throughout the week (except Tuesday) for maximum two hours.
3. Casual Walk-in Members/Spouse/Dependents – Rs. 100/- per day for one hour only.
4. Guest accompanied by Member – Rs. 300/- per visit for two hours only.

### ADMISSION & CONDUCT

1. CSOI reserves the right of admission to GYM/SPA facility.
2. Any member or guest whose conduct is considered inappropriate, will be expelled without offering any reason.
3. The management reserves the right to refuse/renew the membership of any member.
4. The facility will remain open on all days from 7.00 a.m. to 12.00 Noon & 4.00 p.m. to 9.00 p.m. (Except Tuesday)

### CLUB PROPERTY

1. Under no circumstances, any item of institute property will NOT be removed from the premises.

### MEMBERSHIP

1. Membership can be frozen for any reason.
2. If a member decides to terminate the membership before his/her duration ends, he/she will stand to forfeit the remainder of the Quarterly fees.
3. Lost membership cards will be replaced against a fees of Rs. 100/- (Rupees One Hundred Only)

### FOOD & BEVERAGES

1. Consumption of Food & Drinks inside the facility is prohibited.

### MEMBERSHIP

1. Members may avail facility of lockers on first come first serve basis.

### INDEMNIFICATION CLAUSE (UNDERTAKING)

I represent that I have answered all the questions correctly and take full responsibility of its accuracy I further represent that I have been duly informed of all treatments and exercise facilities offered by club and have inspected equipment thereof. I have read all rules and regulations on operations of this facility.

I also represent and warrant that all exercises, treatment and use of all the facilities shall be undertaken by me at my own risk, that I am in good physical condition and i am physically able to perform/take on any and all physical exercise.

I also agree to indemnify hold harmless CSOI Health Club and/or agents and employees from any claims or demands arising out of any injury to my person or damage to my property in connection with the use of the services and equipment provided by club or during the course of my visit to the premises.

\* All disputes are subject to delhi jurisdiction Only.

Name of Applicant

Signature

Date :

Place :