



HOAR CROSS HALL  
SPA HOTEL

# HEALTH COMMITMENT STATEMENT

Your health is your responsibility. The Management and Staff of Hoar Cross Hall are dedicated to helping you take every opportunity to enjoy the facilities and treatments that we offer. With this in mind, we carefully considered what we can reasonably expect of each other.

## OUR COMMITMENT TO YOU

- We will respect your personal decisions, and allow you to make your own decisions about what exercise you can carry out and treatments you enjoy. However, we ask you not to exercise beyond what you consider to be your own abilities.
- We will make every reasonable effort to make sure that our equipment and facilities are in a safe condition for you to use and enjoy.
- We will take all reasonable steps to make sure that our staff are qualified to the therapy and fitness industry standards.
- If you tell us you have a disability which puts you at a substantial disadvantage in accessing our equipment and facilities, we will consider what adjustments, if any, are reasonable for us to make.

## YOUR COMMITMENT TO US

- You should not exercise beyond your own abilities. If you know or are concerned that you have a medical condition that might interfere with you exercising safely or enjoying a treatment, you should get advice from a relevant medical professional and follow that advice before using our equipment, therapies and facilities.
- You should make yourself aware of any rules and instructions, including warning notices. Exercise carries its own risks. You should not carry out any activities or enjoy treatments which you have been told are not suitable for you.
- You should notify your instructor or therapist of any existing or new medical conditions before you commence an activity.
- You should let us know immediately if you feel ill when having treatment, using our equipment or facilities.
- Our staff members are not qualified doctors, but there will be a person available who has first aid training.
- If you have a disability, you must follow any reasonable instructions to allow you to exercise or enjoy your treatment safely.

Please detail below medical conditions or health issues you think may affect your treatment or use of the facilities at Hoar Cross Hall:

## TERMS AND CONDITIONS

1. All customers must sign the Health Commitment Statement before commencing any exercise programme or activity.
2. I understand that I use the spa facilities, exercise and enjoy treatments at my own risk and I am ultimately responsible for my own general health and welfare.

Signing this form I confirm that I have read, understood and completed this Health Commitment Statement. I agree not to use any item of exercise equipment without receiving full instructions beforehand in its use from an instructor. I agree not to participate in any activity or treatment if I have not notified my instructor or therapist of any existing or new medical conditions.

Spa Day Guest     Overnight Guest

Customer Name: .....  
(Please print clearly in BLOCK CAPITALS)

Mobile Number: .....

Date of birth: ..... / ..... / .....

Email Address: .....

Customer Signature: .....

Address: .....

Date: ..... / ..... / .....

..... Post Code .....

Room number: .....

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