

MEMBERSHIP ENQUIRY

1. About You

First Member

Mr Mrs Miss Ms

Other: _____

Forename(s): _____

Surname: _____

Age: 18-25 26-35 36-45 46-55 56+

Second Member

Mr Mrs Miss Ms

Other: _____

Forename(s): _____

Surname: _____

Age: 18-25 26-35 36-45 46-55 56+

Address

Town: _____

County: _____

Postcode: _____

Tel (day): _____

Tel (eve): _____

Mobile: _____

Email: _____

2. Are You Interested In Corporate Membership?

Yes No

If yes, name of company: _____

Company address: _____

Most appropriate contact: _____

Tel: _____

Email: _____

3. How Did You Hear About The Club?

Sign/Banner Leaflet Press Radio Letter Mailing Corporate Recommendation Television Campaign Hand Picked Website

Other Websites / Search Engine: _____

Other _____

We may use your details to inform you of products, services and promotions offered by the Health Club & Spa, the Hotel and Hand Picked Hotels. If you do not wish to receive any information please tick here

Official Use Only

Reference code: _____

Enquiry taken by: _____

Date: _____

Details recorded on system

TOUR CARD

To help us understand your goal please complete the following questionnaire.

4. Exercise History

Are you currently exercising? Yes No

If yes, are you/have you been a member of a gym? Yes No

Please state which one? _____

Do you regularly take part in sports or activities? Yes No

If so, what? _____

If no, when was the last time you exercised on a regular basis?

3-6 months 6-12 months 1-2 years

2-5 years 5 years+ Never

Out of 10 how would you describe your current condition (10 being the highest)? _____

5. I Want To...

Make a physical appearance benefit e.g. Lose weight, tone up, increase muscle

Gain a performance benefit for my sport or activity e.g. Speed, strength, flexibility, endurance

Improve my general health and well being e.g. Reduce stress, relax, feel happier

Be part of an enjoyable social health club e.g. Meet people, try something new

6. I Am Interested In...

The pool for exercising

The pool, hydro therapy pool, sauna and steam for relaxation

The fitness gym

Cardio Resistance

Free Weights Core Stability

Fitness Classes e.g. Body Pump, Spinning etc

Mind and Body Classes e.g. Yoga, Tai Chi, Pilates

Personal Training

The Spa and Treatments

7. Summary

What is your number one priority? _____

Why is this important to you? _____

When do you want to start? _____

Official Use Only

Membership tour taken by: _____

Date: _____

Official Use Only

Joined by: _____

Date: _____