Community Associations FITNESS CENTER / SPA



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Name of Facility: Location of Facility:			
Facility open to	Owners Only Owners &	Guests Ger	neral Public
Are releases signed by guests Yes No (if yes, please attach copy)			
Is personnel			
If independent contractors – are they required to provide proof of insurance Yes No			
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What instruction services are available?			
Personal Trainers: Yes No			
Aerobic Classes: ☐Yes ☐No			
Weight Training: ☐Yes ☐No			
Nutrition Counseling: Yes No			
Other:			
Are staff members required to know		Yes	∐No
Is there a: Pool Hot Tub Sauna Other:			
Is there an employee on duty duri	Yes	□No	
Are warnings posted for use of this equipment?		Yes	□No
Is instruction posted concerning proper use of equipment?		Yes	□No
Is there a free weight room?		□Yes	□No
Are tanning machines provided?	□Yes	□No	
Are warnings posted?	Yes	□No	
Are guests allowed to operate machines?		Yes	□No
Are any special events conducted	Yes	No	
If yes explain:			
Spa			
List what spa treatment are offered or attached menu (e.g. deep tissue massage, hot rock			
massage, acupuncture, holistic healing, etc)			
What are the annual receipts for spa treatments?			
Are spa services concessioned?		Yes	No
Does the spa sell any private label products?		Yes	□No
If yes, what are the total receipts for spa products?			