



## Third Party Practitioner Agreement - Renewal

Practitioner Full Name: \_\_\_\_\_ Business Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

The SCRD recognize the limited number of training facilities available to residents and practitioners. We understand the need to use SCRD facilities for a training space. Training may include, but is not limited to, personal training, private coaching or instructing, and active rehabilitation.

The above noted Third Party Practitioner would like to renew the Agreement for use of SCRD training facilities. It is the third party practitioners' responsibility to ensure required paperwork is up to date.

The SCRD reserves the right to permit or refuse access to SCRD facilities by a Third Party Practitioner based on the following specific terms and conditions prior to using any SCRD facility as a training facility.

### 1. Third Party Practitioner is required to provide copies of the following documentation:

- a) Current certification, registration or membership for recognized professional governing bodies of such professions as personal trainer and/or an undergraduate degree in Kinesiology, Human Kinetics, Exercise Science, or related field. Expiry \_\_\_\_\_
- b) Current First Aid, CPR - Level C and AED certificates. Expiry \_\_\_\_\_
- c) Liability insurance for at least \$2,000,000 listing the SCRD and its facilities as additional insured. Expiry \_\_\_\_\_

Any associated costs for obtaining and maintaining the above credentials is the responsibility of the Third Party Practitioner and NOT the SCRD. Third Party Practitioners are responsible for providing SCRD Recreation updated copies of their certifications upon expiry.

### 2. At renewal it is mandatory for the Third Party Practitioner to fulfill the following requirements:

- a) Complete and sign this Third Party Practitioner Agreement – Renewal form.
- b) Review, and understand the emergency protocol for the facilities. Initials \_\_\_\_\_
- c) Review, and understand the SCRD facility guidelines including code of conduct. Initials \_\_\_\_\_
- d) Would you like to be included in the Third Party Practitioner handout for front desk? Yes\*\* No  
\*\*If yes please provide a head shot and short bio for the handout.

### 3. In consideration of the use of SCRD facilities, the Third Party Practitioner agrees to the following:

- a) Scan 10 visit Third Party Practitioner Pass or pay \$12 (for each individual client session with maximum of 2 clients per session).
- b) Pick up their Third Party Practitioner ID card on their first visit, which is to be visible at all times. ID card is also the multi-visit card. Replacement cards are \$5 if the initial one is lost or stolen.
- c) Ensure the training client(s) pay the drop-in admission rate, or swipe their MYPASS or 10 visit card.
- d) Train no more than the maximum of two clients at one time.
- e) Third party training to occur in the weight room but other facilities may be available to rent at the commercial rate.
- f) Ensure his/her clients adhere to the SCRD facility guidelines including code of conduct.

- g) Refrain from administering advanced practice techniques and testing, which may include, but are not limited to, maximal exercise testing, lactate threshold testing, manual therapy (manipulation, traction, massage, active release), body circumference measurements deemed inappropriate for public space, and the use of modalities.
- h) Refrain from soliciting business while using our facilities, unless you are approached by the patron.
- i) Avoid offering advice or instruction to patrons other than your own clients, unless you witness a safety risk, in which case, we would encourage you to educate the patron and/or notify SCRD recreation staff.
- j) Refrain from dominating equipment, apparatus, or space; you are expected to share the equipment and space with the public.
- k) Inspect and approve each apparatus as suitable before permitting your client to use the equipment.
- l) Use of the Third Party Practitioner's own equipment is permitted provided it is not attached to or does not modify any SCRD equipment or infrastructure. The Third Party Practitioner MUST conduct weekly inspections and record maintenance of their equipment to deem it safe for use; the SCRD will not be held responsible for any equipment malfunction or injury related to the Third Party Practitioner's equipment.
- m) Refer facility and program related questions to SCRD Recreation staff when unsure of the answer or are not able to provide full response to their questions.
- n) Should a substitute trainer be required to deliver services in your absence, he/she must register and provide full documentation to SCRD Recreation prior to using the facility.
- o) The Third Party Practitioner is expected to train within his/her scope of practice as appropriate for the facilities.

I have read and understand the Facility Usage for Third Party Practitioner Agreement and agree to abide by its terms and conditions. This agreement is valid from the date signed for up to 2 years expiring on July 31<sup>st</sup> of the second year.

\_\_\_\_\_  
Practitioners Full Name (PRINT)

\_\_\_\_\_  
Business Name

\_\_\_\_\_  
Practitioners Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
SCRD Program Coordinator Signature

\_\_\_\_\_  
Date

The personal information you provide on this form is being collected under the authority of the *Local Government Act*. Your personal information is protected by the privacy provisions of the *Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection of this information, please contact the Information and Privacy Coordinator, 1975 Field Road, Sechelt, BC, V0N 3A1, 604.885.6800.