Registration opens for Members w.e.f. 26.08.2026 from 07:00 am onwards at Main Reception.

SR.NO._____

GARWARE CLUB HOUSE

Regd Add : Wankhede Stadium, 'D' Road, Churchgate, Mumbai – 400 020
CIN NO.U92100MH1993NPL071488
Tel : 022 6900 32 32 Email : info@garwareclub.co.in Website: www.garwareclub.co.in
Extn.: Gym – 155 ; Gents SPA – 163 ; Ladies SPA - 168

Healthy

ENROLLMENT FORM FOR PILATES

Date: _____

[THIS REGISTRATION ENTITLED ONLY FOR PILATES;
OTHER FACILITIES CAN BE AVAILED BY ENROLLING SEPARATELY]

I / We would like to enroll for Pilates Classes for 12 Sessions **effective from 1st Sept., 2026** -

1. **Name of the Members wishing to take advantage of Pilates Facility:**

   Mr. _____ Mrs. _____

   Mst. _____ Ms. _____ (Above 14 yrs of Age)

2. This enrollment form will be accepted only if the member or dependents concerned have registered themselves for the Face Recognition System, which is arranged at the Atrium from 7:30 AM to 10:30 PM daily.

3. *Fees for 12 Sessions @ Rs. 9,000/- + Rs. 450/- (5% GST) = Rs. 9,450/-*
   (Locker Facility unavailable)

4. **Preferred Period** (Tick below) **[Swapping of Slots NOT ALLOWED]**

I MORNING BATCH - MONDAY, WEDNESDAY & FRIDAY (Maximum 2 Persons per Slot)
[Dates – 4th, 7th, 9th, 11th, 14th, 16th, 18th, 21st, 23rd, 25th, 28th & 30th Sept., 2026]

[A] 08:00 AM to 09:00 AM [ ] **[B]** 09:00 AM to 10:00 AM [ ]
[C] 10:00 AM to 11:00 AM [ ] **[D]** 11:00 AM to 12:00 PM [ ]

II MORNING BATCH - TUESDAY, THURSDAY & SATURDAY (Maximum 2 Persons per Slot)
[Dates – 1st, 3rd, 5th, 8th, 10th, 12th, 15th, 17th, 19th, 22nd, 24th & 29th Sept., 2026]

[E] 08:00 AM to 09:00 AM [ ] **[F]** 09:00 AM to 10:00 AM [ ]
[G] 10:00 AM to 11:00 AM [ ] **[H]** 11:00 AM to 12:00 PM [ ]

III EVENING BATCH - MONDAY, WEDNESDAY & FRIDAY (Maximum 2 Persons per Slot)
[Dates – 4th, 7th, 9th, 11th, 14th, 16th, 18th, 21st, 23rd, 25th, 28th & 30th Sept., 2026]

[I] 04:30 PM to 05:30 PM [ ] **[J]** 05:30 PM to 06:30 PM [ ]
[K] 06:30 PM to 07:30 PM [ ] **[L]** 07:30 PM to 08:30 PM [ ]

IV EVENING BATCH - TUESDAY, THURSDAY & SATURDAY (Maximum 2 Persons per Slot)
[Dates – 1st, 3rd, 5th, 8th, 10th, 12th, 15th, 17th, 19th, 22nd, 24th & 29th Sept., 2026]

[M] 04:30 PM to 05:30 PM [ ] **[N]** 05:30 PM to 06:30 PM [ ]
[O] 06:30 PM to 07:30 PM [ ] **[P]** 07:30 PM to 08:30 PM [ ]

N.B.: NO MAKE-UP SESSIONS WILL BE MADE AVAILABLE FOR ANY REASON

5. **Please tick what aspect/s of your health would you like to concentrate on?**

Core Stability [ ] Flexibility Posture [ ] Strength [ ]
Stress Management [ ] Relaxation [ ]

6. **What are the three aims that you are hoping to achieve with Pilates?**

1. _____
2. _____
3. _____

7. **Have you ever had an episode of back pain?**

[ ] **NO** [ ] **YES - Please give more details and how many times?**

_____

8. **Have you recently had any injuries or surgery?**

[ ] **NO** [ ] **YES - Please give more details and date/year.**

_____

9. Are you currently experiencing any of the following conditions? If yes, please provide further details:

Lower back pain	[ ] No	[ ] Yes
Anaemia	[ ] No	[ ] Yes
Pelvic pain	[ ] No	[ ] Yes
Bronchitis	[ ] No	[ ] Yes
Any other spinal pain	[ ] No	[ ] Yes
Joint replacements	[ ] No	[ ] Yes
Heart problems	[ ] No	[ ] Yes
High or low blood pressure	[ ] No	[ ] Yes

10. Please circle any of the following conditions that you have been diagnosed with or had treatment for:

Asthama Arthritis Osteoporosis Diabetes Cancer
Depression Epilepsy Dermatitis Stroke

11. Are you pregnant? [ ] **No** **Yes – How many weeks are you?**

When is your due date?

12. *In case of Emergency, the Club House can contact on Mobile _____ other than the Mobile number/s registered with the Club House.*

13. Rules & Regulations

The Club reserves the right to amend these Rules without prior notice, the details of which will be displayed on the Club House Notice Boards.

I/We agree to adhere to all the Rules & Regulations of the Club House, including those related to Pilates, as outlined in the QR Code. Kindly scan the QR Code to review the details.

QR Code

14. Declaration

The Pilates program will begin at a low level and will be advanced in stages depending on your fitness level. We may stop the exercise session because of signs of fatigue or excessive straining. It is important for you to realize that you may stop when you wish because of feelings of fatigues or any discomfort.

There exists the possibility of certain dangers when exercising. They include abnormal blood pressure, fainting, irregular, fast or slow heart rhythm, and in rare instances, heart attack, stroke or death. Whilst every care will be taken, it is impossible to predict the body's exact response to exercise. Every effort will be made to minimize these risks by evaluation of preliminary information relating to your health and fitness and by observations during exercising. If there are any changes to your current health or medication, please notify your Pilates instructor.

I understand that as I will be attending as part of a class and that the exercise program will not be specifically designed to my individual requirements, although the class instructor will highlight any areas of personal weakness and may suggest areas for self-practice. I have read and understood all the information given to me and completed the registration form in full and consent to take part in a modified Pilates class.

The instructor can accept no liability for personal injury related to the participation in a class if:

a Your doctor has on health grounds advised you against such exercise.
b. You fail to observe instructions on safety of an exercise.
c. Injury is caused by the negligence of another participant in the class.
d. Misuse of any equipment: Classes may involve the use of equipment such as theraband, small balls or rings, this is optional and done at your own risk.
e. I / We, ensure to carry Club House Identity Card during the visit to the Club House and same will be produced as & when Staff on duty request for the same.
f. In case of any injury or accident during using the Pilates Facility, in such event I / We shall not hold the Club or its Representatives, Employees, Agents, Members of the Managing Committee, the Facility Management Team or its Proprietor, Instructors, Trainers or any of the Other Members using the Facility, liable or responsible and shall not seek any Legal Recourse against them, in any manner whatsoever.
g. I / We, agree to follow all Rules & Protocols, guidelines and abide by Club House Rules, Memorandum & Articles of Association for availing Pilates Facility and will also observe all written Notices or Verbal Instructions provided to me / us while using the Facility.
e. I/we, will abide by all existing Rules & Regulations of the Club House including Pilates.
f. I / We, agree to follow all Rules & Protocols, guidelines and abide by Club House Rules, Memorandum & Articles of Association for availing Pilates Facility and will also observe all written Notices or Verbal Instructions provided to me / us while using the Facility.
g. I / We are fully aware that this enrolment is for using Pilate Facility only.

I have read & understood, agree and confirm the same.

M'ship No. : _____ **Signature of Primary Member _____**

For Office Use Only

MENTION BATCH NO. _____

₹ _____ **Receipt No.: _____** **Date : _____**

Date: _____ **Signature of Staff: _____**