



The Manor

The Manor Lifestyle Membership

So many people these days take out a gym membership, then do their utmost to avoid using it. We have been racking our brains to find a solution to this epidemic, and thought it would be pretty cool to offer a "Lifestyle Membership", at the Manor Hotel and not just use of a gym.

This means, not only are you entitled to use the impressive range of facilities at our Hotel Leisure Suite, but you can also take advantage of our great gardens and hotel; Chill out on the terrace with a coffee (or something stronger) and take-in the view. Use our indoor pool and the Jacuzzi to relax your muscles, or sweat a few pounds off in the Sauna or Steam room.

Opening Hours:

8.00am - 09.00pm Monday to Friday

8.00am - 08.00pm Saturday & Sunday

(last entry is 30 minutes before close)

Lifestyle Membership Prices

Type of Membership	Monthly cost	6mths for 5	12mths for 9
Single Full	£35.00	£175.00	£315.00
Double Full	£55.00	£275.00	£495.00
Single Off Peak	£28.00	£140.00	£252.00
Double off peak	£45.00	£225.00	£405.00
Single Senior Citizen	£28.00	£140.00	£252.00
Double Senior Citizen	£45.00	£225.00	£405.00
Student	£30.00	£150.00	£270.00
Child Under 16	£12.00	£60.00	£108.00

Off Peak – Monday – Sunday 8.00am – 4.30pm

Student Membership must provide a current student card

Ask Leisure Staff about Family or Corporate Memberships!

Under 16 year olds, are not allowed to use the Gym, Sauna, Jacuzzi or Steam room
Sorry no children under 16 are allowed in the pool unsupervised.

Contact us on 01873 810212 or info@manorhotel.co.uk



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Taste Inn Wales Leisure Suites Terms and conditions

Please initial to confirm that your membership consultant has fully explained this point to your satisfaction.

1 Membership of your Taste Inn Wales Leisure Suite is for a six months ("commitment period") whether paying by monthly direct debit or annually in advance. This is a contractual commitment that binds the member and Taste Inn Wales. Student Membership taken for less than this period must be paid in full for however many months are required in advance all other members must pay by Direct Debt.

2 Fees and charges are reviewed periodically. Members will be given at least one months notice in writing of any changes, which apply to them as follows:

(i) Monthly direct debt must pay any revised fees from the date which it becomes applicable. During the commitment period should the relevant membership fee increase by more than 5% a member paying monthly direct debt may cancel his/her membership by giving notice in writing to the club.

(ii) Members who pay annually in advance will be subject to any revised fee after expiry of the year pre-paid.

3 Student members must produce certification to show they are in full time education and must inform Taste Inn Wales when they are no longer students we reserve the right to back date payments where we have not been informed of this change in situation.

4 One calendar months written notice must be given of termination of membership. Except as detailed in clause 2 (i) and 11 termination cannot take effect before the expiry of commitment period. Taste Inn Wales reserve the right to deduct any moneys owed from customers credit/debit card details(given at initial joining).

5 Customers who pay by direct debt will be required to pay the first installment by Cheque/card or Cash.

7 Double memberships payments are paid by direct debt they must come from one account.

Should one of the partners in the double or family group cease membership and the linked member wish to continue to use the facility the linked member must become an individual member. This involves paying the appropriate individual rates

8 Only the dependents of adult members may be come under 16 members which will allow them access to the pool within pre determined hours under Parent/Guardian supervision and in no way allows them access to the gym/other facilities.

9 Members must carry their membership cards at all times, when visiting the venue and produce them to gain entry to the venue. A fee will be charged for replacement cards.

10 Taste Inn Wales reserves the right to close or withdraw any facility without notice for any period in connection with maintenance that the Leisure Manager deems necessary.

11 Taste Inn Wales reserves the right to set aside facilities with notice for conferences or other social events and activities.

12 If any member shall in the reasonable opinion of Taste Inn Wales, cause a nuisance or annoyance to other club members, staff guests, or misuse the club facilities or breach any of the club etiquette guidelines or behave in a way that the club deems inappropriate, we reserve the right to refuse admission and/or expel or suspend that member forthwith. The member in question will be invited to meet with the Leisure Manager to offer an explanation for the alleged breach. The Leisure Manager has the authority to terminate the membership if he/she reasonably holds that the member has behaved in the manner alleged.

13 Taste Inn Wales reserve the right to amend these terms and conditions at any time. At least one month's notice of any changes will be displayed on the club notice boards. Should any amendment to the terms and conditions take effect before the end of the commitment period, the member will have the right to terminate the contract by giving one months written notice.

14 Taste Inn Wales does not limit its liability for death or personal injury caused by the negligence of the club, its staff or its agents, but otherwise excludes all liability to its members. Members use the facilities at their own risk; it is recommended that members seek medical advice prior to embarking on a fitness program

15 Members must not use the free weights unless they have had the relevant instruction from a qualified instructor and must never use the free weights alone. Members should train in pairs or supervised by a qualified instructor.

16 Members must sign in and out of the club at all times.

17 All accidents/ Incidents must be reported immediately.

18 All new members must complete a gym induction by a qualified member of staff before they use any pieces of equipment.

I have read and understood the membership terms and conditions.

Signed

Date

Signed (membership consultant)

Date



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APPLICATION FORM AND HEALTH QUESTIONNAIRE

Full Name:	
Date of Birth:	
Address:	
Post Code	
Telephone Number:	
Email Address:	
Membership Type:	
Membership Number:	
*Partner:	
*Date of Birth:	
*Corporate Group Name:	

*complete if applicable

These questions are designed to assess your suitability for exercise. Please provide the information required as accurately as possible. If answering YES to any of these questions, please give details below (please continue on reverse if necessary).

	Main Member		Partner (If ap)	
	Yes	No	Yes	No
1. Do you suffer from a heart condition?	Yes	No	Yes	No
2. Have you ever had chest pain brought on by exercise or at rest lasting more than 60 seconds?	Yes	No	Yes	No
3. Do you suffer from dizziness or loss of consciousness?	Yes	No	Yes	No
4. Have you ever been diagnosed as with osteoporosis or suffer from bone or joint problems?	Yes	No	Yes	No
5. Do you or have you taken medication for high or low blood pressure or a heart condition?	Yes	No	Yes	No
6. Do you suffer from breathlessness or chronic asthma?	Yes	No	Yes	No
6. Are you aged over 35 and a newcomer to exercise?	Yes	No	Yes	No
6. Are you Pregnant?	Yes	No	Yes	No
7. Are you diabetic?	Yes	No	Yes	No
8. Do you suffer from epilepsy?	Yes	No	Yes	No

Declaration:

I declare that to the best of my knowledge the information given above is correct, and that I know of no reason why I should not participate in an exercise class. I understand that I enter into any exercise program entirely at my own risk and I waive any legal recourse for damages to myself, which may arise, from my participation

Signed Main member _____

Date: _____

Partner (If ap) _____

Date: _____



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STANDING ORDER FORM FOR Manor Hotel Leisure Club

The easy way to make regular payments from your account

1		Your Details																					
FULL NAME Your Address		BANK NAME Bank Address POST CODE Account name: Sort Code																					
Your contact Tel no		Account No																					
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2		Standing Order Details	
Does this instruction replace any existing standing order or direct debit	Yes <input type="checkbox"/> No <input type="checkbox"/>	Special instructions:	
If yes please give details in special instructions below		Credit/debit card details:	
Recipients Name Everest Hotels LTD		Card Number :	
Recipients bank and branch name Barclays Bank		Start Date:	
		Expiry Date:	
		Issue Number:	
		SEC. Number:	

Recipient's sort code 20/18/15	Recipient's account No <table border="1"> <tr> <td>7</td><td>3</td><td>5</td><td>0</td><td>7</td><td>8</td><td>2</td><td>3</td> </tr> </table>	7	3	5	0	7	8	2	3
7	3	5	0	7	8	2	3		
	First payment date								
Monthly Payment amount £	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Usual payment amount in words	Payment reference MEMBERSHIP NO.								
Final payment amount £	Final Payment date or Until further notice								
If different to usual payment £	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								

3		Your Agreement with us														
Please note that we will not make any reference to VAT or any other indeterminate element advise your address to the person/organization you are paying tell the person/organization that you are not able to pay ask the bank of the person/organization you are paying to tell this person/organization when payments are received I authorize to debit my/our account, in accordance with the details in section 2																
Date		Your Signature (s)														
This request is addressed to the bank which holds my/our account		<table border="1"> <tr> <td></td> </tr> <tr> <td></td> </tr> </table>														
For Bank Use Only		Date														
From branch name	Sort Code	Contact Name														
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