



MEMBERSHIP MEDICAL FREEZE FORM

Medical Freeze terms and conditions:

- A “FREEZE” is a defined amount of time without billing, or club usage, and your billing will automatically restart at the end of the freeze or membership expiration date will be updated.
- Medical freeze requests must be received within 30 days of when medical provider was first seen for the medical issue or last HAC facility use
- **PHYSICIAN'S STAMP MUST BE PRESENT ON THIS FORM.**
- The Hampshire Athletic Club has Nationally Accredited Certified Personal Trainers and Athletic Trainers who may assist in the participation of appropriate exercise considering a medical condition. It is suggested that members consult with such personnel before activating a medical freeze in order to continue participating in a regular fitness program. Such programs may be included in your membership.

This is to certify that:

Is currently under my care for the following:

and is unable to participate in ANY FORM of exercise, even which does not disturb the above stated medical condition because:

Patient was seen in office: _____ no _____ yes, date seen: _____

Length of prescribed inactivity: _____

Physicians Signature

Date

PHYSICIAN'S STAMP: