

Wildcat Wellness Center



Volunteer Supervisor Handbook

Wildcat Wellness Center Guidelines



Supervision - The Wildcat Wellness Center is only available for use when under direct supervision by either a Marcus Whitman coach, Athletic Director or the approved volunteer supervisor(s) during regularly scheduled hours. The supervisors will be capable of answering questions about the use of the equipment and be able to intervene when the equipment is not being used in a safe manner. When direct supervision is not present, the Marcus Whitman Fitness Center is closed.

The room will be locked when not in use to prevent unauthorized, unsupervised use. Hours of use will be posted inside and outside the Fitness Center.

Instruction - Any adult who wishes to use the Wellness Center must first provide physician's medical clearance form and receive instruction on the proper use of equipment.

Medical Emergencies - The Wellness Center is equipped with a phone as well as a posting with extensions and emergency numbers in the event of an emergency.

Equipment Maintenance - Equipment will be inspected annually or if any issues are identified with any equipment. Routine maintenance will follow a similar schedule and items will be removed and/or replaced based on schedule or need.

Rules and Regulations - Rules and regulations regarding use of the Wellness Center will be posted. Additionally, instructions for use of each piece of equipment will be posted.

Waivers and Releases - Participants will be required to provide a medical release from a physician before using the Wellness Center. Participants will also sign a consent form understanding the inherent risk in using the Fitness Center.

Attire - Appropriate clothing for physical activity, sneakers, shirt and shorts, will be required.

Participant Eligibility - Minimum age requirement for use of the Wellness Center will be 12 years old provided they are a Marcus Whitman student. Minimum age for community members will be 18 years old. All participants must have signed off on all forms showing an understanding of how to properly use all equipment. Participants can use the Wellness Center during normal operating and supervised hours. Students currently not participating in a sport may use the weight room when other sports teams are using it with supervision. The Wellness Center is not available for use by non-community members.

Wildcat Wellness Center



Volunteer Supervisor Daily Duties

To Start:

1. Make everyone feel welcome
2. Start your “Daily Log” when you arrive for your shift
3. Pick up and clear weights, if needed
4. Wipe down any equipment in need
 - a. Spray towel, not the equipment, with the cleaning solution

During your Shift:

1. Ensure members using the Wellness Center sign in and sign out on provided log sheets
2. Be sure all members are using the equipment properly and adhering to stated procedures.
3. Review Safety Checklist and address any concerns
4. Provide interested members with registration packet for use of the Wellness Center.
5. For new members, who have completed and acquired approval, provide orientation of facility.

Wildcat Wellness Center



Log Sheet

**Wellness Center Access for Approved Community Members (CM)
Students /Staff Only (ST)**

Date: _____

[illegible]

Wildcat Wellness Center



Volunteer Supervisor Daily Log

Date: _____

Volunteer: _____

Time In: _____

List any areas of cleaning:

List any equipment in need of repair:

List any issues that occurred or concerns:

Time Out: _____

Date: _____

Volunteer: _____

Time In: _____

List any areas of cleaning:

List any equipment in need of repair:

List any issues that occurred or concerns:

Time Out: _____



Wildcat Wellness Center Safety Checklist

Checklist for Building/Grounds Supervisor & Athletic Director

	Item	Yes/No
1.	Machines and equipment kept in good condition?	
2.	Electrical machines and equipment properly grounded?	
3.	Treadmills equipped with "stop" safety switch?	
4.	Room design/arrangement adequate? Similar equipment grouped together? Cords arranged away from paths or foot traffic?	
5.	Safety instructions/safety rules posted on equipment and walls as needed?	
6.	Quantity/volume of equipment appropriate for available Space?	
7.	Mirrors secured to walls and in good condition?	
8.	Supervisor qualified in First Aid CPR AED Operation First Aid Kit and AED readily available?	
9.	Room properly secured when supervisory staff not present?	

Signature _____

Date: _____

Signature _____

Date: _____



Wildcat Wellness Center Safety Checklist

Checklist for Volunteer Supervisor

	Item	Yes/No
1.	Treadmills equipped with "stop" safety switch?	
2.	Safety instructions/safety rules posted on equipment and walls as needed?	
3.	Proper supervision of room and equipment use by qualified/trained personnel at all times?	
4.	Participants receive instruction/orientation in advance?	
5.	Spotters used as needed.	
6.	Emergency telephone available with instruction for outside dialing?	
7.	Sign in/out procedure for after school and Community use.	
8.	Hours of operation posted?	
9.	Exits adequate/clear?	
10.	Room properly secured when supervisory staff not present?	
11.	Equipment is clean.	

Wildcat Wellness Center



Membership Form

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home #: _____ Work #: _____ Cell #: _____

Email Address: _____

Emergency Contact: _____

Phone #1: _____ Phone #2: _____

The Wildcat Wellness Center is staffed by MWCSO faculty, staff and community volunteers. Please understand that the Wildcat Wellness Center hours may vary depending on staffing, maintenance, athletics and special events. This information will be posted outside the Wellness Center and on the MWCSO web page.

I understand a background check by the School Resource Officer may be conducted as part of the membership application process.

Member Signature _____ Date: _____

(Office Use Only)

Signed Orientation Documents Received:

Informed Consent, Assumption of Risk
& Waiver of Liability Agreement

Expectations & Procedures

Medical Clearance Form

Initials _____

Initials _____

Initials _____

Wildcat Wellness Center



Expectations & Procedures

Check In:

- All members must sign in on the log sheet and have their membership confirmed by the volunteer on duty.

Clothing:

- Clothing needs to be comfortable and conducive to exercise, and not restrict your movement. Be sure not to wear anything that will get caught in the equipment while exercising.
- Shirts, shorts/pants and sneakers must be worn at all times.

Shoes:

- Fully enclosed athletic shoes (cross trainers, tennis shoes, aerobic shoes, walking shoes, or running shoes) must be worn.
- No open toe or heel shoes, sandals, work boots, dance slippers, aqua shoes, heels, loafers or shoes with cleats, etc. are allowed.

Personal Belongings:

- Personal belongings cannot be left near exercise equipment or carried throughout the Wellness Center (excluding water bottles).
- Personal belongings may be left on the hooks provided.

Food & Beverages:

- Only bottled water and clear containers with water or sport drinks are allowed in the Wellness Center. No soda, juice or glass containers are allowed.
- No food, including gum, is allowed in the Wellness Center.

Equipment Care:

- Please use the provided towels and cleaner to wipe down the equipment after use.
- Please return cleaning supplies to their storage area after use.
- Spray the towel first then wipe down the equipment.
- Replace all dumbbells to rack after use & return free weights to racks.
- Leave the Wellness Center in the same condition as you found it, or better.

Equipment use:

- When using free weights, use collars on all weights. If you need a spotter, ask for assistance.
- Please report any equipment that is malfunctioning or broken to the volunteer on duty.
- If others are waiting to use one of the cardio machines please limit your time to 30 minutes or less.
- Description of each exercise, proper adjustments and target muscles are listed on or near each piece of equipment. Report to Wellness Center volunteer if there isn't one.
- Be sure not to allow weights and plates to bang together...if others hear your weights you are not lifting using proper technique.
- Begin training with light weight and high reps.
- Always warm up and cool down when training.

Use of Wellness Center:

- No person under the age of 12 will be allowed to use or be in the Wellness Center during community use time period.

Date: _____

Signature of Participant: _____

Witnessed: _____

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Medical Clearance Form

Name: _____ has requested use of the Wildcat Wellness Center. A description of the equipment and exercise activities will be displayed and explained to the participant in the orientation session. If you have any further questions about the facility, its equipment or activities, please call the School at (585) 554-6441, ext 1442.

I, _____ (physician's name)

___DO ___DO NOT

provide my consent for

_____ (member's name)

to use the Wildcat Wellness Center and participate in exercise activities.

Known Restrictions:

Physician's Signature: _____

Physician's Printed Name: _____

Physician's Address: _____

Physician's Phone Number:: _____

Date: _____

Informed Consent, Assumption of Risk & Waiver of Liability Agreement

Name: _____ Phone: _____

Address: _____

Emergency Contact: _____

Emergency Contact Phone _____

As a condition of using the Wildcat Wellness Center, I acknowledge that I have read this form, fully understand it and agree to its terms and conditions.

1. I hereby acknowledge I have obtained medical clearance from my physician for use of the Wildcat Wellness Center. Proof of this clearance is provided by the enclosed medical clearance form. I further understand I will be solely responsible for monitoring the manner and intensity of my use of the wellness center equipment and will do so in a way which will not jeopardize the health, safety or physical well being, of myself or others. In particular, I agree I am solely responsible for complying with any restrictions identified by my physician as to use of the equipment or participation in exercise activities. I recognize fitness programs require physical exertion, which may be strenuous and may cause physical injury. I am fully aware of the risks and hazards involved. I further agree if any circumstances occur which would impact my physician's medical clearance, I will notify the School and my physician of the circumstances.

2. Thereby acknowledge I have participated in the wellness center orientation program provided by the School. I agree to follow all directions of the wellness center staff and acknowledge that failure to follow such directions may result in the termination of my privilege to use the wellness center.

3. I understand the supervision of the wellness center provided by the School is general in nature and the wellness center supervisor is not responsible for supervising or monitoring the manner or intensity of my use of the equipment or participation in exercise activities.

4. In hereby acknowledge my use of the School's wellness center involves risks and that I assume all risks associated with my use of the School's fitness center.

5. Thereby I release the Marcus Whitman Central School District, its Board, in both their corporate and individual capacities, its employees and supervisors for all claims (of any nature) relating to my use of the School's wellness center, including, but not limited to, claims for personal injury or death and damage to or loss of personal items.

I fully understand the contents of this document and I voluntarily agree to the terms and conditions stated above.

(User's Signature)

If user is under the age of 18, the user's parent or guardian must also sign this form as acknowledgment & acceptance of the terms and conditions set forth herein on behalf of the user.

(Signature of user's
Parent/Guardian)

(Date)

