

**Hess Fitness & Sports Center Statement of Understanding (SOU)  
and  
Waiver/Assumption of Risk Form**

***I understand and agree that my access to the Hess Fitness Center (FSC) during unmanned hours is a privilege which can be retracted for not abiding by this SOU.***

I understand:

- I will register my Common Access Card (CAC) and sign this SOU and Waiver/Assumption of Risk Form prior to participating in Fitness Access.
- I am not permitted to have guests in the facility during unmanned hours.
- There will be no supervision or assistance during unmanned hours and I am expected to behave in accordance with military rules and standards. Surveillance cameras will record activities within the FSC during unmanned hours. Violations will not be tolerated. As the sponsor, I am responsible for the conduct of my dependents.
- I will be required to swipe my CAC/Fitness Access card for entry. If I am already in the facility when it closes, I will exit the facility and swipe back in for accountability.
- Holding or propping the door open is strictly prohibited and will result in the loss of my privilege; I will ensure that the door closes securely following my entry. Sharing my CAC/Fitness Access card is considered theft of services and will be prosecuted IAW the UCMJ. All other doors WILL remain closed unless needed for an emergency.
- Areas that are not available for use will be locked or clearly marked as restricted.
- There may not be anyone on site to respond to an emergency situation. However, in case of any emergency or need for assistance, an emergency phone is located at (insert location) and will be used to report any issues with the facility (HVAC, burned out lights, broken doors or windows, etc.) or other customers.
- I will identify and assess potential risks before engaging in any activity and will try to exercise with someone or use cardiovascular and selectorized equipment to mitigate risk of injury.
- A spotter is required when using free-weight bars. If a spotter is not available, a power cage WILL be used. Additionally, I understand it is highly recommended not to exercise above my training limits and experience.
- That Hill AFB is not responsible for my personal property.
- In the event of Natural Disaster, Major Accident, and Chemical, Biological, Radiological, Nuclear and Explosive weapons (CBRNE) incident I will follow the published procedures.
- Violation of this SOU and Assumption of Risk could result in loss of my privileges and subject me to further discipline.

**I am  / am not  familiar with how to *safely* operate all fitness equipment available during unmanned hours. If not, an equipment orientation is required before using facility after-hours.**

**Orientation Date:** \_\_\_\_\_

I certify that I have read and understand this SOU and Assumption of Risk form and am fully aware of the published procedures required to utilize the Hill AFB Hess Fitness Center, after hours Fitness Access program. I agree to abide by this agreement and will renew my access annually

Rank/Name: \_\_\_\_\_ Squadron: \_\_\_\_\_

CAC DOD Number: \_\_\_\_\_ CAC Expiration: \_\_\_\_\_

TDY end date (if applicable): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

FSC Staff Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_