

EXTERNAL REHABILITATION TRAINER (ERT) AGREEMENT 2022

City of Delta (Delta) reserves the right to permit or deny registration (and therefore the use of Delta facilities) by **External Rehabilitation Trainers** (Trainer) based on specific guidelines.

Each Trainer must provide proof and maintain validity of the following:

- Post-secondary degree in Kinesiology or Physiotherapy, Physical Education or related field, or Occupational Therapy Certification, or equivalent
- CPR and First Aid Certificate
- CGL Insurance not less than \$5,000,000.00 (*specific to Personal Training and/or Rehabilitative services listing City of Delta as “additional insured”*). City address is 4500 Clarence Taylor Crescent, Delta BC V4K 3E2
- Delta Business License
- Current professional affiliation/membership

Renewal documents must be submitted two weeks before expiry.

Approved applications are per calendar year.

There is a three-month probationary period. Delta weight room staff may monitor first session.

Rehabilitation Clinics

Companies that employ several Trainers may obtain a single Delta business license; however, each Trainer must pay the annual registration fee.

Clinic Managers

Inform Delta of staff changes. Any questions related to the guidelines may be directed to Delta’s program administrator, Teri Lee at tlee@delta.ca.

Trainer Conduct

- Wear appropriate athletic attire and footwear at all times; conduct oneself in a professional manner.
- Wear Delta ID card and two admission bands, visible on their wrist, during each facility visit. Admission bands are provided at the customer service desk upon payment for each clients visit. Trainer fees are \$14 for each client. A 10 admission pass is available. *Trainers are not eligible to purchase any other passes for professional use.*
- Individual Trainer ID cards are issued upon application approval, and are to be returned to Delta when Trainer status is terminated. A replacement fee is charged for lost ID cards.
- Annual registration fee must be paid upon approval for account to be activated. Trainer ID card will be issued at that time.
- Refrain from soliciting business while in the facility. If approached for personal training services by a patron, the Trainer agrees to refer the patron to the weight room attendant on duty.
- Training privileges are specific to rehabilitative services only. Personal training services and sports specific coaching are not permitted.
- Failure to comply with Delta Trainer guidelines and expectations will result in the discontinuation of use of all Delta facilities.
- Provide correct instruction for use of all machines, free weights and other equipment in Delta’s fitness facilities.
- Safe conduct and instruction of exercises.
- Trainers will check in with Delta fitness staff upon arrival and concede to Delta’s fitness staff on any questions of inappropriate exercises.
- In the event trainer or client require first aid or medical attention, a designated Delta staff first aid attendant must be contacted to provide treatment. Any emergencies needing Emergency Medical Services (911) must be brought to the attention of the facility staff immediately.
- Report any incidents to the facility staff for documentation and follow up (injuries, patron complaints).
- All machines and equipment are to be wiped down after each use with the cleaning supplies provided.
- Refrain from monopolizing any piece of equipment or facility space when others are waiting.
- Refrain from using equipment that has not been provided by Delta.
- Cell phones and large bags are not permitted in the weight room. Use on-site lockers as available.
- Follow the facility weight room etiquette and Code of Conduct, as posted in each facility.
- Indemnify, hold and save harmless City of Delta from and against all claims, except the negligence of Delta from losses, damages, costs, actions and other proceedings, including, but not limited to, Workers Compensation legislation made, sustained, brought or prosecuted, in any manner, based upon, occasioned by, or attributed to any injury, including death, property damage, infringement or damage arising from any act or omission of the Trainer, their employers, officers, elected officials, volunteers, servants or agents or persons from whom the Trainer has assumed responsibility on the performance or purported performance of this agreement.

I acknowledge that I have read the Delta External Rehabilitation Trainer (ERT) Agreement and that by signing this document I agree to adhere to all of the above.

Signature _____ Print Name _____ Date _____