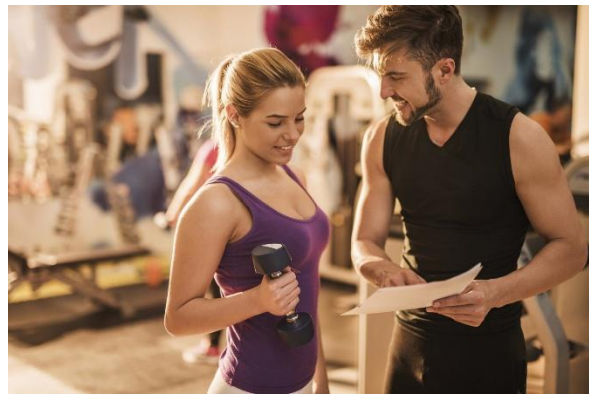




PERSONAL TRAINER/INSTRUCTOR HANDBOOK & APPLICATION



Gibson-Bethel Community Center - Fitness Center
5800 SW 66th St.
South Miami, FL 33143



Application Requirements

Interested candidates must submit all application materials listed below. Completed packets may be delivered to the Gibson-Bethel Community Center or emailed to parks@southmiamifl.gov

Personal Fitness Trainer Policy

All Fitness Trainers will be required to follow the policies and procedures outlined in this packet. Failure to adhere to these policies may result in suspension and/or dismissal.

Personal training / instruction at the Gibson-Bethel Community Center—Fitness Center may be provided only by those individuals approved by Director of Parks and Recreation or his/her designee. An unauthorized personal trainer who is observed or suspected to be conducting personal training may be approached and questioned regarding his/her activities. Any of the following or related behaviors may attract such questioning:

- Assisting a participant with technique, or any specific instruction, but not exercising with that individual during all portions of the workout.
- Writing and/or designing a fitness or workout program for a participant.
- Explaining and providing exercise directions to a participant or group of participants.
- Directing exercise order or duration for a participant.
- Meeting with the same participant on a frequent basis or multiple participants on the same day.
- Getting and returning weights for a participant.
- Directing a participant and/or providing instruction on a particular exercise or routine.
- Receiving payment from another individual for an exercise session.

If a staff member concludes that this policy has been violated, both the trainer and patron may be asked to leave the Gibson-Bethel Community Center.

Repeat violations of this policy may result in suspension or permanent loss of membership at the Gibson-Bethel Community Center.

Annual Trainer Permit Fees

Personal Fitness Trainers are required to pay an annual permit fee of \$600. This is due at the time of application. In addition to the annual trainer permit fee, all clients/trainees must possess a valid fitness center membership (\$20 monthly or \$150 annually). Acceptable forms of payment include money order and debit/credit card. Recurring billing is available and encouraged for fitness memberships.

Permit Limits

A maximum of eight (8) active fitness trainer permits are available in any given year.



Fitness Center Rules and Regulations

- Be at least 14 years of age to use the Fitness Center. Members between the ages of 14 and 17 must have a parent or guardian present at the time of joining and sign a waiver.
- Wear appropriate exercise attire, including sneakers and shirts that are free of vulgar or offensive language. Items that may be included in this category include, but are not limited to:
 - String tank tops that do not cover the torso.
 - Open-toed shoes or sandals.
 - Soiled shoes or clothing.
 - Jeans or pants with prominent grommets.
 - Clothing with messaging that a reasonable person may find offensive or otherwise inappropriate.
- Keep gym bags secured in a locker.
- Refrain from dropping & banging dumbbells, plates & weight stacks.
- Headphones or earbuds are required while listening to any audio on a mobile device.
- Return all equipment to its proper spot when finished.
- Wipe down all equipment when finished.
- Refrain from the use of foul language.
- Refrain from using emergency exit stairwell for exercise training purposes.

Liability Insurance

The City of South Miami has established insurance requirements for those applicants, vendors and contractors entering into agreements with the City for the purpose of special events and activities. Before commencing use or services with the City of South Miami, a certificate of insurance that complies with the requirements must be furnished.

All applicants shall name the City of South Miami (6130 Sunset Drive South Miami, FL 33143) as an “Additional Insured” and shall have the following minimum limits:

Commercial Comprehensive General Liability insurance with broad form endorsement, as well as automobile liability, completed operations and products liability, contractual liability, severability of Interest with cross liability provision, and personal injury and property damage liability with limits of \$1,000,000 combined single limit per occurrence and \$2,000,000 aggregate, including:

- Personal Injury: \$1,000,000;
- Medical Insurance: \$5,000 per person;
- Property Damage: \$500,000 each occurrence;

Umbrella Commercial Comprehensive General Liability insurance shall be written on a Florida approved form with the same coverage as the primary insurance policy but in the amount of



\$1,000,000 per claim and \$2,000,000 Annual Aggregate. Coverage must be afforded on a form no more restrictive than the latest edition of the Comprehensive General Liability policy, without restrictive endorsements, as filed by the Insurance Services Office, and must include:

- a) Premises and Operation
- b) Independent Contractors
- c) Products and/or Completed Operations Hazard
- d) Explosion, Collapse and Underground Hazard Coverage
- e) Broad Form Property Damage
- f) Broad Form Contractual Coverage applicable to this specific Contract, including any hold harmless and/or indemnification agreement.
- g) Personal Injury Coverage with Employee and Contractual Exclusions removed, with minimum limits of coverage equal to those required for Bodily Injury Liability and Property Damage Liability.

Please Note: Approval of insurance by the City of South Miami does not in any way relieve or decrease the insurance liability of the applicant. The City of South Miami does not represent that the specified limits of liability, coverage or policy forms are enough or adequate to protect the interest or liabilities of the applicant or vendor.

Level II Background Screening

A Level II Background Screening/Check is required each year prior to obtaining a permit. Contact South Florida Fingerprinting, located at 5900 SW 73rd Street #304, South Miami, Florida 33143 to schedule an appointment—(305) 661-1636.

APPLICATION ON THE NEXT PAGE



FITNESS TRAINER/INSTRUCTOR PERMIT APPLICATION

Check list

All personal trainer application packets must include the following:

- Completed application; and
- Copy of current personal trainer, primary fitness instructor or group fitness instructor from accredited organization (NCSF, CI, ACE, ACSM, AFAA); and
- Copy of current CPR, AED and First Aid Certifications; and
- Minimum 1,000,000 liability insurance, naming the City of South Miami as an additional insured; and
- Resume; and
- Successfully pass a Level II Background Screening—South Florida Fingerprinting; and
- \$600 fitness trainer annual membership fee; and
- Trainee(s) must have a valid membership.

Applicant Name: _____ Address: _____

City: _____ State: _____ Zip Code: _____

Phone Numbers: Primary #: (____) _____ Secondary #: (____) _____

E-mail address: _____

General Liability Insurance Provider: _____ Policy # _____

Florida’s Driver License or Identification Card Number: _____

First Aid Certification Date: _____ CPR Expiration Date: _____

Please List Personal Trainer Certifications

Type of Certification	Expiration Date (if applicable)



Please List the Names of Your Clients / Trainees.

Full & Last Name	Phone Number
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Indemnification

I, _____, AGREE to indemnify, defend and hold harmless the City of South Miami ("CITY"), its elected officials, employees, agents and volunteers against all loss, costs, penalties, fines, damages, claims, expenses, including attorney's fees, or liabilities by reason of any injury to, or death of any person, or damage to, or destruction, or loss of any property arising out of, resulting from, or in connection with the performance, or non-performance of privately/personal training activities at any CITY park or facilities which is, or is alleged to be directly, or indirectly caused, in whole, or in part by any act of omission, default, or negligence of the applicant, its employees, agents, or subcontractors.

Signature of Applicant

Applicant Signature _____ Date _____

Office Use Only	
Reviewed by: _____	Date: _____
Approved by: _____	Date: _____
Approved / Denied (circle one)	