



2960 Epic Place
Grand Prairie, TX 75052
972-339-3742

Adaptive/Inclusive Accommodations

Member/Guest Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

Request for Adaptive/Inclusive Accommodation

Please describe nature of disability and accommodation needed:

Disclaimer and Signature

I understand that exercise, training and using fitness equipment are potentially hazardous activities. I further understand that these activities sometimes involve risks of injury and aggravation of pre-existing conditions. I am aware that a comprehensive medical examination is necessary before using the equipment and machinery and that a consultation with a physician is essential to determine which physical activities are possible. **If you are currently under a physician's care, The Epic strongly urges you to consult your physician before engaging in any activity.**

Signature: _____ Date: _____