



Third Party Practitioner Registration Package

Thank you for your interest in providing services in Sunshine Coast Regional District (SCRD) Recreation Facilities.

The SCRCD is committed to providing opportunities to create and maintain healthy lifestyles and ensuring citizens have access to a variety of health and wellness opportunities.

Third Party Practitioners must be registered with SCRCD Recreation Services in order to train or coach within SCRCD facilities, excluding the following:

- Instructors who have a contract with the SCRCD to offer programs; or
- Volunteers with organizations who rent SCRCD facilities.

What are the benefits of being registered with the SCRCD Recreation Services?

- Practitioners contact information available for community if requested.
- Recognition that practitioner meets industry standards to offer services.
- Registration identifying Third Party Practitioner as an approved trainer to work in our facilities.

To ensure all Third Party Practitioners meet the industry standards, **first time service providers** must follow these steps:

Step 1: Practitioners will be required to fill in the third party practitioner application form on the next page.

Step 2: Provider must provide copies of:

- Current Liability Insurance (naming the Sunshine Coast Regional District and specific facilities to be used as additional insured)
- Current registration or certification (eg. BCRPA Personal Training, BCAK, etc)
- Current first aid certificate, CPR / AED
- Criminal Record Check, including vulnerable sector

Step 3: Contact SCRCD Recreation to arrange a meeting with a Recreation Program Coordinator to review the agreement and discuss expectations and facility guidelines within this package.

Step 4: Recreation Program Coordinator will provide you a signed approval letter and add you to the list for front line staff to reference.

Step 5: Pay the Third Party Practitioner Fee is:

- \$12 trainer fee per client session, maximum of 2 clients per session. A 10 visit Third Party Practitioner Pass is available at a reduced rate. Note: The Third Party Practitioner must also ensure the client has paid their drop-in fee or have scanned their pass prior to conducting a training session(s).

We appreciate your interest and look forward to discussing your services.

Yours in Health,

SCRCD Recreation Staff

Third Party Practitioner Application Form

Practitioner's Full Name _____

Business Name _____

Address _____

Email _____

Phone (business) _____ Phone (cell) _____

Practitioners Documentation

Registered Association Membership (BCRPA/ BCAA etc.) _____

Level of Training or Certification _____ Expiry _____

First Aid Level/Expiry _____ CPR /AED Expiry _____

Liability Insurer _____ Expiry _____

Criminal Record Check (must include vulnerable sector) completed? Yes No

Would you like to be included in the Third Party Practitioner handout for front desk? Yes** No

**If yes please provide a head shot and short bio for the handout.

FOR OFFICE USE ONLY			
<input type="checkbox"/> Practicing Certification	<input type="checkbox"/> First Aid (CPR and AED)	<input type="checkbox"/> Criminal Record Check	<input type="checkbox"/> Liability Insurance
<input type="checkbox"/> Practitioner Agreement signed	<input type="checkbox"/> SCRD Recreation signed		
Third Party Practitioner Account Updated in Active Net?		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Added to Handout

The personal information you provide on this form is being collected under the authority of the *Local Government Act*. Your personal information is protected by the privacy provisions of the *Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection of this information, please contact the Information and Privacy Coordinator, 1975 Field Road, Sechelt, BC, V0N 3A1, 604.885.6800.

Third Party Practitioner Agreement

The Sunshine Coast Regional District (SCRD) acknowledges there are a number of personal trainers, instructors, and therapists (referred to hereafter as "Third Party Practitioner") operating private businesses within our community.

The SCRD strives to be a model community for healthy living by ensuring our citizens have access to a variety of safe health and wellness opportunities.

We recognize the limited number of training facilities available to residents and practitioners. We understand the need to use SCRD facilities for a training space. Training may include, but is not limited to, personal training, private coaching or instructing, and active rehabilitation.

The SCRD reserves the right to permit or refuse access to SCRD facilities by a Third Party Practitioner based on the following specific terms and conditions prior to using any SCRD facility as a training facility.

1. The Third Party Practitioner is required to meet with SCR D Recreation staff and provide originals of the following documentation for photocopying:

- a) Current certification, registration or membership for recognized professional governing bodies of such professions as personal trainer and/or an undergraduate degree in Kinesiology, Human Kinetics, Exercise Science, or related field;
- b) Current First Aid, with CPR - Level C and AED certificates;
- c) Liability insurance for at least \$2,000,000 AND include the SCR D and its facilities as additional insured;
- d) Criminal record check, including vulnerable sector;

Any associated costs for obtaining and maintaining the above credentials is the responsibility of the Third Party Practitioner and NOT the SCR D. Third Party Practitioners are responsible for providing SCR D Recreation updated copies of their certifications upon expiry.

2. Upon meeting with SCR D Recreation staff, it is mandatory for the Third Party Practitioner to fulfill the following requirements:

- a) Complete and sign the Third Party Practitioner registration form and Third Party Practitioner Agreement
- b) Review, and understand the emergency protocol for the facilities Initials _____
- c) Review, and understand the SCR D facility guidelines including code of conduct Initials _____

3. In consideration of the use of SCR D facilities, the Third Party Practitioner agrees to the following:

- a) Scan 10 visit Third Party Practitioner Pass or pay \$12 (for each individual client session with maximum of 2 clients per session).
- b) Pick up their Third Party Practitioner ID card on their first visit, which is to be visible at all times. ID card is also the multi-visit card. Replacement cards are \$5 if the initial one is lost or stolen.
- c) Ensure the training client(s) pay the drop-in admission rate, or swipe their MYPASS or 10 visit card.
- d) Train no more than the maximum of two clients at one time.

Third Party Practitioner Agreement

- e) Third party training to occur in the weight room but other facilities may be available to rent at the commercial rate.
- f) Ensure his/her clients adhere to the SCRD facility guidelines including code of conduct.
- g) Refrain from administering advanced practice techniques and testing, which may include, but are not limited to, maximal exercise testing, lactate threshold testing, manual therapy (manipulation, traction, massage, active release), body circumference measurements deemed inappropriate for public space, and the use of modalities.
- h) Refrain from soliciting business while using our facilities, unless you are approached by the patron.
- i) Avoid offering advice or instruction to patrons other than your own clients, unless you witness a safety risk, in which case, we would encourage you to educate the patron and/or notify SCRD recreation staff.
- j) Refrain from dominating equipment, apparatus, or space; you are expected to share the equipment and space with the public.
- k) Inspect and approve each apparatus as suitable before permitting your client to use the equipment.
- l) Use of the Third Party Practitioner's own equipment is permitted provided it is not attached to or does not modify any SCRD equipment or infrastructure. The Third Party Practitioner MUST conduct weekly inspections and record maintenance of their equipment to deem it safe for use; the SCRD will not be held responsible for any equipment malfunction or injury related to the Third Party Practitioner's equipment.
- m) Refer facility and program related questions to SCRD Recreation staff when unsure of the answer or are not able to provide full response to their questions.
- n) Should a substitute trainer be required to deliver services in your absence, he/she must register and provide full documentation to SCRD Recreation prior to using the facility.
- o) The Third Party Practitioner is expected to train within his/her scope of practice as appropriate for the facilities.

I have read and understand the Facility Usage for Third Party Practitioner Agreement and agree to abide by its terms and conditions. This agreement is valid from the date signed to July 31st of the current year.

Third Party Practitioner Name (print)

Business Name

Third Party Practitioner Signature

Date: _____

SCRD Recreation Signature

Date: _____

Third Party Practitioner Approval Letter*

*To be filled out by Program coordinator once approved

Approval Date:

Practitioner's Full Name:

Business Name:

RE: **Third Party Practitioner Letter of Understanding**

To whom it may concern;

The Sunshine Coast Regional District (SCRD) is pleased to grant _____ use of the SCRD facilities for the delivery of third party practitioner services as per the terms of the Third Party Practitioner Agreement.

This agreement will be effective until July 31st and renewal is required for it to continue.

We look forward to working with your business to provide expanded opportunities for our patrons and the residents of the Sunshine Coast.

Respectfully,

Recreation Program Coordinator