



BUDDY UP FORM

Name:

Member ID:

1. Age category

19-30

31-50

51-60

60+

2. What activity would you like to share with a buddy

Effex 180 workout

Walking

Running

Cycling

Golfing

Curling

Swimming

Other please specify

3. Please give information on where you are at with the activity so we can match you up with someone of similar fitness e.g. I want a learn to run buddy or I want a buddy who can walk up to 60 minutes at a brisk pace.

4. How much time are you looking to spend with a buddy? Be as specific as possible about location, length of activity and days available. E.g. 2 days per week Tuesday and Thursday for 30 minutes in the park (or downtown River Valley during lunch break). Please indicate if you are flexible.

5. What time of day are you able to do the activity with a buddy?

Before work (6- 8 am)

Morning (8-12 am)

Lunch (12-1 pm)

Afternoon (1-4 pm)

After work (4-6 pm)

Evening (6-9 pm)

Contact Information:

Telephone #

Email:

I hereby give my consent to EFFEX 180 to release my contact details and the above personal information to potential buddies.

Signature: _____ Dates: _____

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Potential Buddies: