**RRRDC Guidelines for Use of Treadmill and Bicycle**

Desk Treadmills and Desk Bicycles are open to use by Red River Regional Dispatch Center employees who comply with the established guidelines and have signed a waiver for use.

1. Use of the equipment is voluntary and employees must complete the Red River Regional Dispatch Center Desk Treadmill and Bicycle Waiver and Release Form prior to use.
2. Equipment is for use of RRRDC employees only. No family members of employees, visitors, observers, or Public Safety personnel or any other non-RRRDC employees are permitted to use the equipment.
3. It is the responsibility of users to follow directions of their personal physician when using exercise equipment. The equipment may not be used when recovering from any injury or during illness.
4. The equipment should only be used during an employee’s on duty time.
5. Employees should not go faster than two miles per hour at maximum on the treadmill.
6. Employees may sign up for 60 minute blocks of time on the equipment, taking into consideration other employees interest in use the equipment as well.
7. Employees may not use equipment during a sit-along or during new employee training.
8. Employees should not exceed their cardiovascular abilities that may impact phone or radio traffic (i.e. hard breathing)
9. Employees who use the equipment are expected to and are responsible to clean equipment after use.
10. Employees should not eat or drink while using the equipment.
11. Employees should only use the equipment if it does not detract from their work performance. (i.e. refrain during peak work load times)
12. If equipment is damaged or is malfunctioning, it should be taken out of use, a trouble report completed, and supervisory personnel notified immediately.
13. Equipment must be adjusted to allow for proper ergonomic control of all monitors, keyboard and mice.
14. When not in use, equipment must be stored in the back of the room near console 1.
15. Prior to moving the equipment all electrical connections to the equipment must be completely disconnected.
16. Tennis shoes are required to be worn when using the equipment.
17. RRRDC reserves the right to limit or withdraw usage if guidelines are not adhered to.

Employee to sign and date receipt and of RRRDC Guidelines for Use of Treadmill and Bicycle:

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Employee Signature Date Signed

RED RIVER REGIONAL DISPATCH CENTER

DESK TREADMILL AND BICYCLE WAIVER AND RELEASE FORM

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street City State Zip

Phone: Home:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact: Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participants must be employees of Red River Regional Dispatch Center to use the Desk Treadmill and Desk Bicycle on the dispatch floor.

The undersigned, hereby agrees to the following:

1. That use of the Desk Treadmill and Desk Bicycle is at my own risk; I hereby release Red River Regional Dispatch Center from any and all liability for injury or death arising out of my use of the equipment.
2. That it is my responsibility to ensure that I am physically able to operate the equipment. I understand that I am responsible for monitoring my own physical and mental condition throughout my use of the equipment and assume the risk of such use.
3. I have been advised to become familiar with the equipment before use.
4. I understand that there are no physical exercise professionals on site.
5. I agree to follow the guidelines set by RRRDC for use of the equipment
6. As a condition precedent to and in consideration of permission to use the Desk Treadmill and Desk Bicycle, the undersigned, knowingly and voluntarily assumes any and all risk inherent in the pursuit of all exercise activities while on the premises and using this equipment. By my signature I waive and release any and all claims arising out of the use of the equipment against the Red River Regional Dispatch Center, Board of Authority, their agencies, employees and agents, for any damages, injury or death.

As a Red River Regional Dispatch Center employee, I understand that the use of the Desk Treadmill and the Desk Bicycle is a voluntary activity and that I am under no duty to attend nor instructed from any supervisory personnel of Red River Regional Dispatch Center to use the equipment. The use of this equipment does not constitute the performance of any of my job duties or tasks for Red River Regional Dispatch Center. Any injury resulting from the use of the facility or equipment shall not be covered by workers’ compensation.

In signing this consent form, I affirm that I have read this form in its entirety and I understand its contents. I have read the Red River Regional Dispatch Center Guidelines for Use of Treadmill and Bicycle and agree to abide by the guidelines. Questions concerning the use of the facility have been answered to my satisfaction.

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Employee Signature Date Signed

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Witness Signature Date Signed