

# THE BIGGEST LOSER CONTEST

## INFORMATION

8-week, self-paced individual contest to lose the highest percentage of weight. Ready to tip the scale?

## ELIGIBILITY

Open to all UHealth Students + Current Rec Center Members

## ENTRY "FEE"

*Includes: T-SHIRT for all finishers, motivation, accountability + award for The Biggest Loser!*  
15 non-perishable food items due by first weigh-in. Items will be donated to the Houston Food Bank.

## DATES

8—WEEKS Monday, September 30th —Friday, November 22nd, 2019  
FIRST WEIGH —IN Monday, September 30th between 5:30AM—8:00PM  
WEEKLY WEIGH—IN Monday and Friday between 5:30AM—8:00PM  
FINAL WEIGH—IN Friday, November 22nd between 5:30AM—8:00PM

## RULES

Everyone must weigh-in on the same scale! Numbers are based on weight loss percentage.  
**WEIGHT LOSS PERCENTAGE = ((INITIAL WEIGHT—PRESENT WEIGHT) / INITIAL WEIGHT) X 100**  
FIRST WEIGH —IN 15 Non-Perishable Food Items (Unless turned in during registration.)  
WEEKLY WEIGH—IN 1 Non-Perishable Food Item/Week  
MISSED WEIGH—IN 2 Non-Perishable Food Items  
NO WEIGHT LOSS or GAIN 1 Non-Perishable Food Item  
WEIGHT GAIN per POUND 1 Non-Perishable Food Item per Pound (Example: 3lbs Gained = 3 Items Due)

## AWARDS

All finishers earn a T-SHIRT + The Biggest Loser receives his/her choice of:  
1—Initial Consultation which Includes: Fitness Assessment + 1 Hour Personal Training Session  
1—Month Membership  
1—Unlimited Semester Group Fitness Class Package

## REGISTRATION

Enrollment is open from Tuesday, September 3rd – Friday, September 27th, 2019.  
To register, make sure membership is current + submit Registration Form by:  
(1) E-Mail to [corey.jefferson@uth.tmc.edu](mailto:corey.jefferson@uth.tmc.edu)  
(2) Fax to 713-500-8409—Attention: Corey Jefferson  
(3) At the Rec Center —Weekdays: 5:30AM—10PM, Saturday: 8AM—8PM + Sunday: 10AM—8PM

## QUESTIONS?



Contact Corey Jefferson Wellness Coordinator  
[corey.jefferson@uth.tmc.edu](mailto:corey.jefferson@uth.tmc.edu) or 713-500-8427  
[www.uth.edu/recreation-center](http://www.uth.edu/recreation-center)

### PARTICIPANT INFORMATION

NAME	_____ MALE _____ FEMALE
E-MAIL	PHONE #
TMC INSTITUTION	DEPARTMENT/SCHOOL

### ASSUMPTION OF RISK AND RELEASE WAIVER

I, \_\_\_\_\_, have volunteered to participate in THE BIGGEST LOSER activity at The University of Texas Health Science Center at Houston (UTHealth) Recreation Center. I realize that such exercise, in some circumstances, elicit certain complications such as abnormal blood pressure, dizziness or fainting, irregular heart rhythms and, in some instances, heart attack or stroke. I accept the risks associated with such exercise and understand that I may cease participation at any time and for any reason, including feelings of fatigue or any other discomfort or concern. I further understand that, in connection with participation in this activity, it is my responsibility to disclose all relevant information regarding my health status and any previous experiences of unusual responses, symptoms, complications or other issues due to physical effort. I also understand the importance of my promptly reporting any concerns or discomfort I may experience with effort during exercise. I hereby release and hold harmless UTHealth, The University of Texas System, and their regents, officers, employees and representatives from liability for injury or death or damage to property that may result from my participation in this activity. I have read this form and understand the procedures and risks involved and consent to participating in THE BIGGEST LOSER. Any questions I have regarding these procedures have been answered to my satisfaction. By signature below, I consent agree to all terms of this Informed Consent as set forth above.

PARTICIPANT'S SIGNATURE	DATE
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### FRONT DESK STAFF DIRECTIONS

Verify current member, ensure Registration Form is complete + put in binder for WELLNESS. No CSI Program Registration. Food due by 1st weigh-in!