Personal Training Contract / Agreement

Date		
	n to participate in an exercise program. With the help o ster, safer and with maximum benefits. The details of th	
In order to maximize progress, it will be necessary for you to follow program guidelines during supervised and (if applicable) unsupervised training days. Remember, exercise and healthy eating are EQUALLY important.		
including increased heart stress and the ch	every effort will be made to assure your safety. However nance of musculoskeletal injuries. In volunteering for thi ersonal damage. You also agree that, to your knowledge	is program, you agree to assume responsibility for
women 55 years and older. Personal traini acknowledge they have been informed of it	ommended for (1) <i>all</i> participants with any exercise resing participants in either or both of these categories who is importance. By signing below, you accept full responsionsibility is assumed by the leaders of the program.	o do NOT have prior physician examinations MUST
	ram participants work with their personal trainer three mbination of supervised and unsupervised workouts is	
Personal Training Terms and Conditions		
 Personal training sessions that are not rescheduled or cancelled 24 hours in advance will result in forfeiture of the session and a loss of financial investment at the rate of one session. Clients arriving late will receive the remaining scheduled session time, unless other arrangements have been previously made with the trainer. The expiration policy requires completions of all personal training sessions within 180 days from the date of contract. Personal training sessions are void after this time. Unless otherwise specified in writing. No personal training refunds will be issued for any reason, including but not limited to relocation, illness and unused sessions. Unused personal training sessions cannot be transferable to another individual. 		
Description of the program:		
Total investment:		
Method of payment:		
1	BEST OF LUCK ON YOUR NEW PERSONAL TRAINING PA	ROGRAM
Participants name (please print clearly)	 Da	ite:
Participants signature	 Da	ite:
Parent / Guardians signature (if needed)		

Witness' signature



Date: