



SPEEDBLAST® SOCCERBLAST™ TRAINING CONTRACT

Please provide the following information:

Full Name: _____

Date of Birth: _____

Street Address: _____

City, State, and Zip: _____

E-mail: _____

Home Phone: _____

Cell Phone: _____

Business Phone: _____

Emergency Contact: _____: Relationship of Emergency Contact: _____

I, _____ (full name) hereby agree to accept and be legally bound by this Personal Training Contract. By signing this document, I attest, contract, and acknowledge, and agree that I am legally bound by its content.

Eligibility

- Clients must be currently authorized by their Physician in order to participate in this or in any other Fitness Program or Regimen with the Personal Trainer/Group Fitness Instructor.
- Clients will be required to complete the proper documentation prior to participation within the personal training program.
- The Personal Trainer/Group Fitness Instructor reserves the right to deny services to participants who may or be able to exercise safely within the program parameters.
- If it is determined that the client has one or more signs or symptoms, based on criterion set forth by the American College of Sports Medicine and/or the Aerobics & Fitness Association of America, that could be potential risk during exercise, he/she will be referred to their Physician for an in depth fitness assessment before receiving any personal training or any other type of classes from the Personal Trainer/Group Fitness Instructor.



Conduct of Training Sessions

- Client must wear proper attire (i.e. shorts, sweat pants, t-shirt, tennis/running shoes, etc.). Absolutely no jeans, jean shorts, sandals, open toe shoes, or clothing with profane language of any kind.
- Do not bring any distracting electronic or communication devices (i.e. cellphone, iPad, tablet) as it may interfere with the productivity of the training session.
- Leave all valuable items (which includes jewelry) at home as the Personal Trainer/Group Fitness Instructor will not be responsible for holding these items or accountable for lost items.
- Please be sure to have a meal whether it be liquid or solid before a session or the Personal Trainer/Group Fitness Instructor deems the right to cancel a session due to lack of preparation.
- If it is evident that the client's ability to perform is impaired through drugs or alcohol, the Personal Trainer/Group Fitness Instructor has the right to immediately terminate the session.
- If there is a persistent violation of the client not being adequately prepared either through nutrition/hydration and or impaired through drugs/alcohol, the Personal Trainer/Group Fitness Instructor has the right to terminate the contract.
- All sessions will be conducted at the fitness facility agreed upon the by Personal Trainer/Group Fitness Instructor and Client.
- Training sessions will be a maximum of 60 minutes in length and will not run over. All training sessions will be recorded by the Personal Trainer/Group Fitness Instructor. Each client will have a personal training record that contains the number of sessions purchased. After each training session, the trainer will initial and date the record.
- Training sessions must be conducted/completed within the time frame of the agreement.

Print Name: _____

Signature: _____ Date _____

Witness Signature: _____ Date _____



RELEASE OF LIABILITY (Please Read Carefully)

I have enrolled in a program of strenuous physical activity including, but not limited to walking, running, boxing, kickboxing, yoga, weight lifting, bicycling, step aerobics, aerobics, circuit training, Bootcamps, Speedblast Training®, Osteoblast Training®, Soccerblast Fitness, soccer coaching, water base exercise, body sculpting and use of various conditioning and exercise equipment and facilities designed, offered, recommended, and/or supervised by **Kyle Taylor Gibbs**, Personal Trainer/Group Fitness Instructor. I hereby affirm that I am in good physical condition and do not suffer from any disability that would prevent or limit my participation in this program.

In consideration of my participation in the program, I for myself, my employees, heirs, assigns, agents, officers, directors, shareholders, and co-workers hereby release and spouse, relatives, heirs, assigns, agents, officers, directors, and shareholders, from any and all claims, demands or causes of action arising from my participation in the program or from any use of the conditioning and exercise equipment and facilities.

I fully understand that I may suffer as a result of my participation in the program and I hereby release **Kyle Taylor Gibbs** any and all liability now or in the future, including but not limited to medical expenses, lost wages, pain and suffering, that may occur by reason of heart attacks, strokes, fatality, muscle strains, pulls or tears, broken bones, shin splints, heat prostration, knee/lower back/foot injuries, and any other illness, soreness, or injury, however caused, whether occurring during or after my participation in the program or use of the conditioning and exercise equipment and facilities regardless of fault.

Some of the assessments (i.e. blood pressure, skin fold test, circumference measurements, stretching, and technique correction) will require me to touch the client to conduct testing and during exercises/stretching to ensure proper preparation and technique. By signing this contract, you are giving permission to the aforementioned Personal Trainer/Group Fitness Instructor to conduct his/her professional skills without liability.

The one-to-one and group personal training sessions will include video taking and pictures which will be used for marketing and promotional purposes. By agreeing to the terms herein, permission is given to the aforementioned Personal Trainer/Group Fitness Instructor to use the electronic images/data/material in said professional capacity.

By signing this document, I attest, contract, acknowledge, and agree that I am legally bound by its content.

Print Name: _____

Signature: _____ Date: _____

Witness: _____ Date: _____



PRICING AND PAYMENT

I acknowledge and agree that this Personal Training Contract is not transferable nor assignable. I acknowledge that payment is required for blocks of sessions in advance of actual training sessions. I agree to pay in advance for training sessions. I understand this money is not refundable. I understand this contract and the terms it presents is for the purchase of sessions and any other purchase of services in the future. I acknowledge that this specific contract, release of liability, consent, and agreement is continuously valid in definitely. No refund will be granted for sessions not completed. I understand **Kyle Taylor Gibbs** has the right and the authority to terminate the program at any time, with no refund, if I do not follow the program or fail to conduct myself in an appropriate manner.

By signing this document, I attest, contract, acknowledge, and agree that I am legally bound by its content.

Hourly Sessions	One on One	Group of 2 or more
1 session	\$40	\$25

Session packages may be purchased with half the fee due at the beginning of the program and the remaining half due at the midpoint of the program.

***I acknowledge that I have been informed that missed sessions will be charged at the usual rate unless I cancel 10 hours in advance or family emergency. _____ (Initial)**

I fully understand that the cost of an individual package must be paid by cash, check, Venmo or Paypal. All training sessions must be paid in full directly to **Kyle Taylor Gibbs or A1A Fitness** prior to my participation in this program. A \$35 fee will be charged for each returned check.

Print Name: _____

Signature: _____ Date: _____

Personal Trainer/Group Fitness Instructor Signature: _____

Date: _____