

PERSONAL TRAINING REGISTRATION FORM



Welcome to Personal Training at the Shoreview Community Center!

Our group of highly qualified and experienced trainers are committed to help you achieve your health and fitness goals!

If you have questions regarding our personal training policies or other concerns, please contact the Personal Training Coordinator.

PACKAGES:

Packages must be paid in full, on or before the first meeting with your trainer. Personal training sessions are 50 minutes in length. All personal training packages expire one year from date of purchase. Assessments are included with packages of 3 or more sessions.

ASSESSMENTS:

Assessments are used to determine current fitness levels. Measurements and tests taken during assessments will be specific to the goals/needs of the individual and may include body measurements, body fat calculations, resting heart rate and/or blood pressure, flexibility testing, muscular strength and/or endurance testing, posture assessment, cardiovascular testing, and sports-specific tests. Assessments vary in length from 30 to 50 minutes depending on specific tests included.

CANCELLATIONS:

If for any reason, a trainer has to cancel their appointment with less than a 24 hour notice, the client will be provided a complimentary session at the next regularly scheduled time. In return, we request a 24 hour cancellation notice. If a 24 hour notice is not given by the client, the client will be charged for the full amount of the scheduled appointment.

PROMPTNESS:

If a trainer is more than 15 minutes late, the client will receive a complimentary 50-minute session arranged at a mutually convenient time for the client and the trainer. If a client is late for the scheduled session, there will be a reduction in the session length equal to the time late. The client will be billed at the scheduled rate. If the client is more than 15 minutes late, the trainer has the right to cancel the session and bill the client for the session.

REFUNDS:

All Personal Training packages/sessions are non-refundable. Under extenuating circumstances such as illness or injury, alternative arrangements may be made at the discretion of the Personal Training Coordinator. If for any reason, a trainer does not suit a client's needs, another trainer will be provided.

MEMBER INFORMATION:

LAST NAME: _____	FIRST NAME: _____	MEMBER ID: _____
ADDRESS: _____	CITY, STATE, ZIP: _____	() _____
CHOOSE ONE:		
PREFERRED CONTACT: <input type="checkbox"/> E-MAIL <input type="checkbox"/> PHONE	E-MAIL: _____	

PERSONAL TRAINING PACKAGES - CHOOSE ONE

	REGULAR	RESIDENT
ASSESSMENT	___ \$25	___ \$22
*SINGLE SESSION	___ \$60	___ \$55
*THREE SESSIONS	___ \$174 (\$58 Ea.)	___ \$159 (\$53 Ea.)
*SIX SESSIONS	___ \$324 (\$54 Ea.)	___ \$300 (\$50 Ea.)
*TWELVE SESSIONS	___ \$612 (\$51 Ea.)	___ \$564 (\$47 Ea.)

(Assessment included with packages of 3 sessions or more for first time clients)

PERSONAL TRAINERS - CIRCLE CHOICE

201 ADRIENNE	208 TIM
203 HOLLY	209 WENDY
204 JEN K.	210 JENNT.
205 KAREN	211 WANDA
207 MIKE	
OTHER: 214 ASSESSMENT	

PAYMENT TYPE:

CASH CREDIT CARD #: _____ EXP. DATE: ____/____/____

CHECK #: _____

SIGNATURE: _____

WAIVER OF LIABILITY CLAIM:

In consideration of you accepting this entry, I hereby, for myself, my heirs, my executors and administrators, waiver any and all rights and claims for damages I may have against the City of Shoreview, the Parks & Recreation Dept. or the school district and its representatives, successors and assigns for any and all injuries suffered by myself at any activity sponsored by these groups. I do hereby allow the City of Shoreview to use any photographs taken by the city, of the individual named herein, in city informational publications released to the general public.

SIGNATURE: _____ DATE: _____