

Personal Training Agreement

Full name:	
DOB:	
Street Address:	
City, State Zip Code:	
Phone number:	
Email:	
Emergency Contact:	
We will conduct sessions/week (total of sessions are sold for a monthly rate and will not roll over unless not	
My rate will be	
An established routine is the best way to stick to you during the personal training agreement period.	ur fitness regime and guarantees you a time slot
Each of the above indicated sessions shall be	_ minutes in duration.
I (the client) understand that I may cancel any appo email, phone call or online scheduler. I also underst cancellation notice as indicated, it may result in my	and that if I fail to provide the aforementioned
If I am late to a session, my session may not be cond	ducted for the entire duration as specified above.
If my attendance rate is below 75% for the session, upon renewing my personal training agreement.	I understand that I may lose my specified time slot
If at any time I am unable to participate or unsatisfic terminate the services (in writing) and be refunded	ed with services provided by Fitness Command, I can for the remaining balance.
I agree to pay a return check fee of \$5 or Fitness Co	mmand's current bank rate.
Signature:	Date: