



# Fitness Program Agreement

Client Name: \_\_\_\_\_ Trainer: \_\_\_\_\_

Purchase Date: \_\_\_\_\_ Program Type: \_\_\_\_\_

Session Type: Hour Partner Group

Payment Method: Cash \_\_\_\_\_ Check # \_\_\_\_\_ V/MC/AMEX \_\_\_\_\_

Credit card # \_\_\_\_\_ Exp. \_\_\_\_\_

Name on card: \_\_\_\_\_

I, \_\_\_\_\_ agree to purchase \_\_\_\_\_ personal training sessions at a total charge of \$\_\_\_\_\_. I understand that session dates and times are scheduled with my trainer. A 24-hour notice is required to change or cancel sessions. Failure to provide 24-hour notice will result in a loss of the session. If there are extenuating circumstances, please contact your trainer. The trainer has the right to grant or deny any extensions. Expiration of this program shall be \_\_\_\_\_.

### Money-back Guarantee

I guarantee you will realize significant and tangible results from my services if you adhere to the fitness and nutrition program I outline for you, or you are entitled to a full refund of your initial package cost. In order to receive a refund you must be able to honestly say that you consistently followed your fitness and nutrition program; for the specified time and did not see any noticeable results.

### Informed Consent

I, \_\_\_\_\_, give my consent to participate in the Fitness Evaluation and Exercise Program given to me by my trainer. I understand that exercise carries some risk to the Musculo-skeletal system (sprains, strains) and the Cardio respiratory system (dizziness, discomfort, heart attack). I hereby certify that I know of no medical problem, except those noted on the Health History Questionnaire, which would increase my chance of injury or illness as a result of participation in an exercise program. By signing this consent form I understand that I am personally responsible for my actions while under the direction of my trainer. I also understand that I am waiving the responsibility of my trainer, and Achieve Fitness and Rehabilitation, if I should incur an injury as a result of my negligence.

Client signature \_\_\_\_\_ Date \_\_\_\_\_

Trainer signature \_\_\_\_\_ Date \_\_\_\_\_