



It Starts With You – PT PROMOTION

PERSONAL TRAINING RECORD

CLIENT NAME	
CONTACT NUMBER	

5 x 60 MINUTE PT SESSIONS

SESSION #	DATE	START TIME	FINISH TIME	TRAINER NAME	RECEIPT #
1		:	:		
2		:	:		
3		:	:		
4		:	:		
5		:	:		

SESSION #	DATE	START TIME	FINISH TIME	TRAINER NAME	RECEIPT #
1		:	:		
2		:	:		
3		:	:		
4		:	:		
5		:	:		

SESSION #	DATE	START TIME	FINISH TIME	TRAINER NAME	RECEIPT #
1		:	:		
2		:	:		
3		:	:		
4		:	:		
5		:	:		



PERSONAL TRAINING TERMS & CONDITIONS

- All payments/session packages are non-refundable.
- Multiple packs can be purchased.
- Notification of cancelled appointments must be made more than 24 hours in advance of the session start time. Failure to do so will incur a cancellation fee equivalent to the full price of the session and/or the loss of that session from your package.
- Emergency cancellations will be treated at the discretion of the personal trainer.
- The session will be deemed to have started at the pre-arranged session time. Any lost time due to late arrival will not be made up at the end of the session.
- In the case of the personal trainer falling ill or being unable to instruct the session, the session will be cancelled and re-arranged.
- A towel to wipe down equipment and a bottle of water to keep hydrated are required for every session. The use of deodorant and good personal hygiene is recommended for the comfort of members and gym staff.

DISCLAIMER

- I recognise that the personal trainer is not able to provide me with medical advice regarding my medical fitness and that the information is used as a guideline to the limitations of my ability to exercise safely.
- I agree to inform my trainer of any health conditions or injuries that may have changed or occurred since my last training session.
- I also state that I wish to participate in activities which may include aerobic exercise, resistance exercise and stretching. I realise that my participation in these activities involves the risk of injury. I hereby confirm that I am voluntarily engaging in an acceptable level of exercise which has been recommended to me.

I have read and understood the terms and conditions above and agree to abide by them.

SIGNATURE.....

PRINT NAME..... DATE/...../.....