

Adult Member Personal Training Registration Form

Members Only. Appointments are set up on an individual basis. Payment is required before first training session.

Member Name:			Date://	
Address:				
		Zip:		
Phone:	Email:			
TRAINING OPTIO				
_	_	Pilates Training	☐ Yoga Training	
2- Sessions 5- Sessions 10- Sessions		 □ \$11	0 (2 on 1) 0 (2 on 1) 95 (2 on1)	
Each Session is One Training Partner Na	hour in length me:			
TRAINING PREFERENCE	<u>.</u>			
☐ Weekdays	Weekends M	ornings 🗆 🗗 A	Afternoons 🗆 Evenings	
Specific Trainer Request:				
Please submit to FRONT I	DESK with payment and you	u will be contacted by	a trainer to set up an appointment	
Wellness Center Office (<u> </u>	
Date RECEIVED:/		Date Contacted://		
Trainer:				
Instructor's note:				