



PERSONAL TRAINING CLIENT PACKET

Personal Training Etiquette

Please observe the following training etiquette:

- Client must be a current Zeeland Recreation Fitness Center member. A one-month Premium Individual Fitness Center Membership* is included in the cost of each personal training package. **Member may upgrade to any other type of membership for the additional cost.*
- Payment is due in advance.
- All personal training sessions are scheduled directly with your trainer.
- Appointments must be cancelled 24-hours in advance by calling your trainer directly. Failure to do so will result in forfeiture of that session.
- Training sessions are 45-minutes long. Trainers will subtract that time from that training session. Trainers will wait 15-minutes for late arrivals before you forfeit the session.
- To maximize your training session, please devote your full attention to your session.
- Please follow all Zeeland Recreation Fitness Center policies and guidelines.
- The purchaser only may redeem sessions. (Except when the personal training package is a gift.)
- All personal training packages expire 12-months after purchase date. All personal training packages are non-refundable. (Exception: If your medical condition changes resulting in physical limitations, a pro-rated refund will be given. A physician's letter is required.)

Client/Personal Trainer Guidelines

The guidelines outline the responsibilities and relationship between the Client and the Trainer.

Client Responsibilities:

It is very important for you to share all health history information and any medical concerns with your trainer. Notify your trainer of any medications you are currently taking and anytime new medications or diagnoses are given, it is imperative that you inform your trainer. Medications and certain conditions may pose risks to some types of training and your trainer must be aware in order to adjust your program safely and accordingly.

If at anytime during your training session you feel discomfort or pain, you must tell your trainer. It will take hard work and dedication for you to reach your fitness and health goals. Your trainer will provide the correct exercise program and technique; however, you must provide the commitment of your energy and concentration during each session.

Trainer Responsibilities:

Each individual training session is designed in order for you to meet your fitness and health goals. Each session will last a maximum of 45-minutes. Your trainer will create a workout program that is safe, effective, and designed specifically to help you reach the goals agreed upon by you and your trainer.

If your trainer must cancel a session, you are owed the session. If your trainer is late for a session, you are owed the time.

All information regarding your program and your progress is confidential and kept on file for a minimum of 3-years following the end of your participation in the program.

I understand and agree to the responsibilities explained above.

Client Signature: _____ Date: _____

Trainer Signature: _____ Date: _____

Client Profile

Name: _____ Age/DOB: _____

Address: _____

City: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Emergency Contact: _____ Relationship: _____

Emergency Contact: _____ Relationship: _____

Occupation: _____ Hours/Week: _____

Prescribed Medications: _____

Are you being treated for any medical issues? If so, please list: _____

Are you currently experiencing pain during daily activity? _____

Have you ever worked with a Personal Trainer before? Yes or No

If yes, when, for how long, and what was the outcome? _____

Physical Activity Readiness Questionnaire (PAR-Q)

Name: _____ Date: _____
(Please print)

Please read the following questions carefully and check (X) the appropriate answer. Answer all questions honestly and to the best of your ability.

Yes No

- ____ ____ 1. Has your doctor ever said that you have a heart condition (had a stroke, heart attack, or heart surgery) and/or that you should only do physical activity recommended by a doctor?
- ____ ____ 2. Do you feel pain in your chest when you do physical activity?
- ____ ____ 3. In the past month, have you had chest pain when you were not doing physical activity?
- ____ ____ 4. Do you lose your balance because of dizziness or do you ever lose consciousness?
- ____ ____ 5. Have you ever been told by a doctor that you have bone, joint, or muscle problems that could be made worse by physical activity?
- ____ ____ 6. Do you have a diagnosed illness that could be made worse by physical activity?
- ____ ____ 7. Is your doctor currently prescribing medication for your blood pressure or heart condition?
- ____ ____ 8. Are you pregnant?
- ____ ____ 9. Are you over the age of 69 and not accustomed to vigorous exercise?
- ____ ____ 10. Do you know of any reason why you should not do physical activity?

If you answered YES to one or more questions, you must consult with your physician and complete a medical clearance form BEFORE beginning an exercise program.

I have answered the questions above to the best of my ability and affirm that my physical condition is good and I have no known conditions that would prevent me from participation. I understand that by signing this agreement I hereby waive and release Zeeland Recreation, its staff, and all relevant employees in any way from liabilities or demands because of injury, loss, or adverse health conditions because of my participation.

Signature of Participant

Date

Client Goals

Why are you seeking a Personal Trainer?

What are your objectives in your personal fitness program?

Please list two short-term health and fitness goals:

1)

2)

Please list two long-term health and fitness goals:

1)

2)

Measuring your fitness level regularly is one way to find out if you are making progress. What is your preferred method of benchmark?

What is your attitude toward exercise?

What motivates you?

What makes you 'fall off' your health and fitness routine?

What are your favorite and least favorite physical activities?

Where will you find support during your training efforts?

Have you communicated your goals and needs to your support person/group?

Do you have any concerns regarding your training?

When you achieve your goals, what are you most excited to do and/or accomplish?

When you achieve your health and fitness goals, how will you reward yourself?