

Thank you for taking part in personal training. Below are my policies and procedures
These allow me to be most efficient and provide the best service possible.

Expiration Policy:

All purchased training appointments/sessions expire **6 months** after the date of the first training session. Any sessions that remain after the expiration date will be forfeited. If you are physically unable to continue training, you must bring a doctor's note. Any prolonged travel plans you must make special arrangements in advance

_____ Initials

Tardiness Policy:

You are expected to begin working out at the start time of the scheduled appointment. A late start time does not entitle you to a session longer than the scheduled appointment. For example if you are 20 minutes late for a 60 minute training session, your session will be reduced to 40 minutes and you will not receive credit for the remaining 20 minutes.

_____ Initials

Cancellation and Rescheduling Policy and Procedure:

Last minute cancellations or attempts to reschedule are inconvenient for me and for my other clients. While I will make every effort to be flexible and accommodate your schedule, I will do so only under the following conditions:

If you need to cancel an appointment / training session you must do so by calling _____ within **24 hours** of the appointment time. If I am not available, leave a message. I will check my availability and get back to you with confirmation of the rescheduled date and time as soon as possible. If for any reason you do not call within **24 hours** of your appointment you will forfeit your training session. The only exception to this policy is a medical emergency accompanied by a doctor's note.

If special circumstances call for it and my schedule permits, we may agree upon a shorter notice period, in which case you will not forfeit your training appointment/session. The determination of whether circumstances warrant, or my schedule permits, are decisions which will be left to my sole discretion.

_____ Initials

I have read and understand all the policies listed above.

Signature: _____ Date: _____

Name: _____