

Personal Training Client Agreement

The guidelines outlined below are to ensure that the relationship between the Trainer and Client and the responsibilities of both parties are clearly appreciated and understood.

Trainer's Responsibilities:

1. Your trainer will design a personalized program that meets the client's needs and goals that is safe, effective and conducive.
2. Each session will last at least 60 minutes, but will not exceed 75 minutes.
3. Your trainer will provide guidance regarding proper exercise techniques.
4. Your trainer will maintain a record of client progress and provide necessary feedback.
5. Your trainer will evaluate and modify the personalized program as necessary according to the client's progress, needs, and goals.
6. If your trainer is late for a session, that time is owed to the client.
7. Trainer must notify the client 4 hours prior to session, if they must cancel; at which time the session will be rescheduled.
8. All information regarding the client, client's program and progress is confidential and will not be transferable to any third party.

Client's Responsibilities:

1. Payment must be received prior to the first meeting.
2. Client is expected to discuss all health history information and any medical concerns with the trainer.
3. All appointments must begin on time and end one hour after the scheduled starting time. Any time lost due to client tardiness is considered part of the appointment and is non-refundable. The trainer is expected to wait 15 minutes for a client at which time the session is forfeited.
4. Client must give 24 hour notice for session cancellation. Failure to do so will result in forfeiture of the planned session.
5. Client will communicate any discomforts, pain or concerns experienced during or arising from a session.
6. Sessions must be used within 4 months of purchase, unless other arrangements have been made with the trainer.
7. If client, for any reason, does not fulfil all of their sessions in the package, no refund will be given.
8. Client acknowledges that he/she is in good health and physically able to participate in a personalised program. By signing below, client acknowledges and agrees that he/she has no limiting health conditions that would preclude participation in an exercise program, and will immediately inform the trainer if such health condition arises during the client's participation in the personalized program.

I understand and agree to the roles and responsibilities explained above:

Client's Signature: _____ **Date:** _____

Trainer's Signature: _____ **Date:** _____