

PERSONAL TRAINING SERVICES

Our personal training services are designed to provide clients with specific exercise instruction to help them safely and effectively reach their health and fitness goals. All of our trainers hold nationally accredited certifications so you can rest assured you're receiving fitness instruction from experts in the field. First time personal training clients purchasing four or more individual sessions are required to purchase and complete a fitness assessment with their trainer. View fees below.

INDIVIDUAL 60 MINUTE SESSIONS

Sessions	Member	Non-Member
One	\$50	\$58
Four	\$192	\$223
Eight	\$375	\$436
Twelve	\$550	\$639
Twenty	\$800	\$820

PARTNER | 2

60 MINUTE SESSIONS | PRICE PER PERSON

Sessions	Member	Non-Member
One	\$35	\$40
Four	\$136	\$156
Eight	\$264	\$304
Twelve	\$384	\$444

GROUP | 3-5

60 MINUTE SESSIONS | PRICE PER PERSON

Sessions	Member	Non-Member
One	\$30	\$35
Four	\$116	\$136
Eight	\$184	\$264
Twelve	\$264	\$384

YOGA

60 MINUTE SESSIONS | PRICE PER PERSON

Sessions	Member	Non-Member
One	\$50	\$58
Four	\$192	\$223
Eight	\$375	\$436
Twelve	\$550	\$639
Twenty	\$800	\$820

FITNESS ASSESSMENT

(PRICE PER PERSON) - call to schedule

	Basic	Advanced	Senior
Individual	M: \$60 NM: \$80	M: \$80 NM: \$100	M: \$80 NM: \$100
Group	M: \$30 NM: \$40	M: \$40 NM: \$50	M: \$40 NM: \$50

Personal Training Intake Form

Name: _____ Date ____/____/____

Day Phone _____ Evening Phone _____

E-mail _____ DOB ____/____/____

Personal training interest (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Strength Training | <input type="checkbox"/> Cardiovascular training |
| <input type="checkbox"/> Aquatic personal training in the pool | <input type="checkbox"/> Flexibility training |
| <input type="checkbox"/> Weight management | <input type="checkbox"/> Balance/core training |

Other: _____

What time of the day would you prefer to personal train?

- Morning (5am - 9am) specify: _____
- Midday (9am - 3pm) specify: _____
- Evening (3pm - 10pm) specify: _____

What days are most convenient for you to personal train?

- | | | | |
|---------------------------------|-----------------------------------|------------------------------------|-----------------------------------|
| <input type="checkbox"/> Monday | <input type="checkbox"/> Tuesday | <input type="checkbox"/> Wednesday | <input type="checkbox"/> Thursday |
| <input type="checkbox"/> Friday | <input type="checkbox"/> Saturday | <input type="checkbox"/> Sunday | |

Do you prefer a: Male Trainer Female Trainer No Preference

Do you have a specific trainer in mind? Yes No

If yes, please specify: _____

Please list any specific needs that should be considered when selecting the proper trainer (i.e. - hypertension, diabetes, post physical/cardiac therapy, cancer, pre/post - natal):

What are your main goals you would like to accomplish through personal training?

Are you a member of Riverside Wellness & Fitness Center? Yes No

Personal training packages & sessions are not eligible for a refund. All purchases are final.

Signature Date

* Signature required with purchase

Please turn in completed copy to a fitness staff member
or scan and email to lisa.mcneil@rivhs.com