

## Personal Training Inquiry Form

Name:	Age:
Gender: Male Female	
Email Address:	
Phone: ()	
Weight: Height:	
Do you have a preference on the gender o	f the trainer?
Male Female Indi	fferent
Is there a specific trainer you would like t	o work with?
How many sessions are you interested in j	purchasing?
What time of the day would you like to tra	ain?
How many day a week do you want to tra	in?
What is your present activity level? Please	e explain: (ex. Inactive, active, etc.)

What are your goals?

Do you have weight training experience (please specify)?

Additional Comments:

Please allow 48 business hours for a response.