

PERSONAL TRAINING APPLICATION Check one: **New** _____ **Renewal** _____ **Email** _____

NAME *Please print clearly. Complete ALL information requested.*

Last	First	M.I.	Date of Birth	Gender M ___ F ___
Address		City	State	Zip
HOME#	Cell#	E-Mail		

Trainer Affiliation: **At Your Door Personal Training** U.S. Citizen
 Yes ___ No ___

**START NOW TO RECEIVE 1 ON 1 TRAINING WITH A CERTIFIED PERSONAL TRAINER
 THROUGH At Your Door Personal Training, LLC**

CALCULATE YOUR PERSONAL TRAINING PAYMENT AS FOLLOWS:

*Payment options are subject to change
 *YOU GET YOUR INITIAL ASSESSMENT FREE

INDIVIDUAL:			
13:	\$55/session	\$715	
26:	\$47.50/session	\$1235	
39:	\$40/session	\$1560	

OR

Weekly Online Workouts: \$50.00/month \$10.00/additional programs

(Only offered to those individuals who have completed 13 sessions or more of personal training with Alex Smith)

* Payment is due in full on the day of sign up (unless otherwise arranged with Alex Smith)*

All payments are final as made on the signed date, and no refunds will be provided
 All future payments made imply agreement and renewal of all contractual terms

Payment: Cash or Check	Personnel Making Payment	
Amount of Payment:	Signature:	Date Signed
Cash: \$ _____	X _____	_____/_____/_____
Check: \$ _____		

Please make check or money order payable to **Alex Smith.**
Total Enclosed \$ _____

WAIVER OF LIABILITY MUST BE SIGNED BY APPLICANTS & LEGAL GUARDIAN OF APPLICANTS UNDER 18 YEARS OF AGE

In consideration of my participation in any exercise program with, Personal Trainers associated with At Your Door Personal Training, LLC, I acknowledge that I understand the nature of the activity and that I, and/or my minor child, am qualified, in good health, and in proper physical condition to participate in such activity. I fully understand that exercising involves risk of serious bodily injury, including permanent disability, paralysis, and death, and that these and other risks may be caused by my own actions, or inaction, those of other participating in the event, the conditions in which the event takes place, or the negligence of my trainer, and that there may be other risks either not known to me or not foreseen at this time and I fully accept and assume all such risks and all responsibility for losses, costs and damages whether to myself, others, my property, or the property of the Personal Trainers associated with At Your Door Personal Training, LLC, which incur as a result of my participation in the activity.

I hereby release, discharge and covenant not to seek legal action on the Personal Trainers associated with At Your Door Personal Training, LLC, from all liability, claims, demands, losses or damages on my account caused or alleged to be caused in whole or in part by the negligence of the Personal Trainers associated with At Your Door Personal Training, LLC. This release, waiver of liability and express assumption of risk agreement does not apply to any liability, claims, demands, losses or damages arising out of the gross negligence of or intentional, willful or want on misconduct of the Personal Trainers associated with At Your Door Personal Training, LLC. If I or anyone on my and/or my minor child's behalf makes a claim against any of the Personal Trainers associated with At Your Door Personal Training, LLC, I will indemnify, defend, save and hold harmless the Personal Trainers associated with At Your Door Personal Training, LLC from any loss, liability, damage or cost which may incur as a result of such claim.

I acknowledge that I have read this release, along with At Your Door a Personal Training, LLC terms of services, waiver of liability and express assumption of risk agreement and fully understand it.

X _____ DATE SIGNED: ____/____/____ EFFECTIVE DATE _____
 MEMBER'S SIGNATURE
 FOR PARTICIPANT'S OF MINORITY AGE (UNDER AGE 18 AT TIME OF REGISTRATION)

X _____
 SIGNATURE OF PARENT OR LEGAL GUARDIAN

