



PERSONAL TRAINING

Do you have everything it takes to get in shape but lack motivation? Are you someone that needs strong personal motivation? Would you get more from your work outs if someone took you through every exercise every time you came to work out? Are you the type of person that just doesn't want to think when you're at the gym and would do better in your workouts if someone motivated and guided you through every step from the time you got to the gym until you went home? If the answer is YES, then you may be perfect for the YMCAs' one-on-one coaching or personal training program!

PROGRAMS

To meet your goals and needs

QUICK TRAIN PROGRAM (QT)
30 minute individual sessions

6 sessions	\$180
12 sessions	\$350
16 sessions	\$430

EXTENDED PROGRAM (EX)
45 minute individual sessions

6 sessions	\$230
12 sessions	\$450
16 sessions	\$560

BUDDY PROGRAM (BUD)
60 minute 2-5 people sessions

6 sessions	\$300
12 sessions	\$540
16 sessions	\$700

Health Coaching (HC)

Can be an add-on service to individual personal training programs or can be a stand-alone option. Health Coaching is a 6-month commitment.

\$65/month
\$20/month for FA members

What is a Health Coach, exactly?

A certified Health Coach is a wellness authority and supportive mentor who motivates individuals to cultivate positive health choices. Your health coach will help you see your life from all angles—not just nutrition and fitness. She can help you evaluate all of the important areas in your life and how they affect your overall health. She can make suggestions based on your individual needs and goals.

Buddy Program

Do you have a friend who shares similar fitness goals? A group of co-workers all looking to improve their health? Maybe you like the idea of a personal trainer, but doing it alone is still scary? Your YMCA is now offering a Buddy Program. Groups of 2-5 can sign up together to show up together to get fit together! The Buddy Program can provide additional motivation, support, and accountability that you may be needing.



2020 Personal Training Information (only fill this out prior to the first time you meet with a trainer)

Name
Phone number
Emergency contact & phone number
Preferred workout times and days

Please answer the following questions:

- A. Which package and dollar amount did you or will you choose? _____
- B. Date paid for the trainings: _____

- 1. What is your age? _____
- 2. What is your height & weight? _____
- 3. Are you currently taking medications? _____
- 4. Have you had a heart attack or any known heart disease? _____
 - a. If yes, please describe: _____
- 5. Do you have epilepsy? _____
- 6. Are you pregnant? _____
- 7. Any asthma or exercise induced asthma? _____
- 8. Do you take insulin? _____
- 9. Do you have a history of high blood pressure? _____
- 10. Do you smoke? _____
 - b. If so, how many packs a day? _____
- 11. Any other significant medical history? _____

12. Do you have pain with motion and/or swelling: _____?

13. Have you had an injury in any of the following areas:

- Knee Shoulder Back Elbow Foot
- Hip Ankle Wrist Other:

Date of recent surgery: _____

Any other information you would like to provide to ensure you have a safe and worthwhile experience:

NOTE: if you have answered Yes to questions 4, 8, or 9 or have answered yes to 3 or more of the above questions: you must have a Physicians Consent Form completed and returned before starting your personal training.