



PERSONAL TRAINING REGISTRATION FORM

(Please Print)

Today's date:										
PARTICIPANT INFORMATION										
Last name:			First:		Middle:		<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs.		<input type="checkbox"/> Miss <input type="checkbox"/> Ms.	
Marital status (circle one) Single / Mar / Div / Sep / Wid										
E-mail address:				Birth date:		Age:		Sex:		
				/ /				<input type="checkbox"/> M <input type="checkbox"/> F		
Street address:								Cell phone #:		
								()		
P.O. box:			City:			State:		ZIP Code:		
Occupation:			Employer:				Employer#:			
							()			
Circle Training Days: Mon Tue Wed Thurs Fri Sat					Indicate Time					
Referred By:		<input type="checkbox"/> Flyer		<input type="checkbox"/> e-mail advertisements		<input type="checkbox"/> Website		<input type="checkbox"/> Family or Friend Name:		
Referrals name:										
PAYMENT INFORMATION										
(Please fill in your payment Information.)										
Make checks payable to: Kingdom Fitness Training							Check #:			
Personal Training Packages										
<input type="checkbox"/> 1 Session \$65.00 <input type="checkbox"/> 5 Sessions \$308.00 / Save 5% <input type="checkbox"/> 10 Sessions \$585.00 / Save 10% <input type="checkbox"/> 20 Sessions \$1,105.00 / Save 15%										
_____ Exp Date ____ / ____ CVV _____ Total \$ _____										
<input type="checkbox"/> Master Card <input type="checkbox"/> Visa <input type="checkbox"/> Discover <input type="checkbox"/> American Express										
IN CASE OF EMERGENCY										
Name of local friend or relative (not living at same address):				Relationship to Contact:		Home phone no.:		Work phone no.:		
						()		()		
The above information is true to the best of my knowledge. I understand that I am financially responsible for my payments to Kingdom Fitness .										
Participant's signature							Date			
<p>You acknowledge that you have carefully read this "waiver and release" and fully understand that it is a release of liability. You expressly agree to release and discharge the trainers, instructors and Kingdom Fitness Training Corp from any and all claims or causes of action and you agree to voluntarily give up or waive any right that you may otherwise have to bring a legal action against the trainers, instructors, Kingdom Fitness Training Corp for personal injury or property damage. To the extent that statute or case law does not prohibit releases for negligence, this release is also for negligence. If any portion of this release from liability shall be deemed by a Court of competent jurisdiction to be invalid, then the remainder of this release from liability shall remain in full force and effect and the offending provision or provisions severed here from. By signing this release, you acknowledge that there is no refund for any personal, group, and boot camp training. I acknowledge that I will be billed the entire amount of the specified program whether I complete or incomplete any training programs. I also release any pictures taken by Kingdom Fitness and will not be compensated, also they remain property of Kingdom Fitness Training Corp, and will be used for promotional uses only. By signing this release, I acknowledge that I understand its content and that this release cannot be modified orally.</p>										

