



Longwood University – Personal Training Request



Personal Information

Name _____ Sex _____ Age _____

Home Phone _____ Work Phone _____

Campus Department _____ E-mail _____

Emergency Contact: _____ Phone: _____

Are you: Undergraduate Student Graduate Student Faculty Staff Spouse

Personal Training Packages (see attached for options and pricing)

- Fitness Assessment Only
- Starter-Pack
- Multi-Pack (Circle # of sessions: 6 9 12 15 18)
- Buddy Pack (Circle # of sessions: 6 9 12 15 18)
- Additional Sessions (See pricing chart)
 - Indicate # of additional sessions purchased _____

Total Cost: \$ _____

Please provide your preferred training schedule so that we can match you with the trainer who best suits your needs (include the # of sessions/week, preferred days and times)

Do you prefer a male or female personal trainer?

For Campus Rec staff use only:

Trainer Assigned: _____ Registration Date: _____ # of Sessions: _____

Member Registered and Paid Cash Check Check # _____

Pre-Participation Screening Questionnaire Training Card