



Membership Acct. # _____ Exp. Date: _____ Membership Category: _____

Date: _____ Staff Initials: _____

RANDOLPH YMCA

Personal Training Inquiry

Participant's Last Name: _____ First Name: _____

Sex: M / F (circle one) Home Phone #: _____ Cell Phone #: _____

Date of Birth _____ Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Would you like to be on our email list? YES NO

Are you a Randolph YMCA Member? Yes No

Reason/Goals? General Fitness Machines Sports Training

Trainer Preference? Male Female

Medical Condition/Diagnosis? _____

-For Office Use Only-

Availability: _____ Time: _____ AM or PM

Cost:

PERSONAL TRAINING:

- 1 Session \$50
- Buy 10 Sessions, Get 1 FREE! \$500

SMALL GROUP TRAINING

- 1 Session \$60
- Buy 10 Sessions, Get 1 FREE! \$600