



Personal Training Request Form

Member Name _____ Date of Birth _____

Date of Request _____

Email Address _____

Home Phone # _____ Cell Phone # _____

Days and Time Available For Training _____

Times Per Week You Wish to Work With a Trainer _____

Do You Prefer a Specific Trainer? Trainer's Name _____

Please list ALL Health and Fitness Goals:

THANK YOU FOR YOUR REQUEST

A PERSONAL TRAINER WILL CONTACT YOU AS SOON AS POSSIBLE

Please return this form to the Huntley Park District Fitness Center:

12015 Mill Street, Huntley, IL 60142

847-669-3180 www.huntleyparks.org