



KRAVE FITNESS & NUTRITION
New Personal Training Client Form

Name: _____ Date: _____
Cell Phone Number: _____ Home Phone Number: _____
Email address: _____
Date of birth: _____

Exercise is only half the battle, would you would like your trainer to tell you about any nutrition program specials we are offering? Yes No

What is your reason for wanting to do personal training sessions?

What are your goals for the personal training sessions?

What is your current activity level? What have you done for activity in the past?

Do you have any injuries, surgeries, or painful areas we should be aware of?

Are there any factors holding you back from giving 100%? _____

If so, what are they? _____

Do you have people supporting you in your decision to become more fit and healthy?

Please list your availability:

x _____ x _____
(Signature) (Today's date)

*Your personal trainer will be contacting you within 48 hours to schedule your sessions.
We look forward to meeting you!*