

Tryad Personal Training Application

Copy and paste into an email and email to dmaialetti@comcast.net

*Name: _____

*E-mail address: _____

Phone# (optional): _____

*required

Please answer **yes or no** to the following statements:

1. I am physically able to participate in a moderate to intense exercise program, and I understand that there is a risk that I may injure myself.
2. I am willing and able to commit to a meal plan in order to achieve my fitness goals. (e.g. lose weight, tone up, etc.)
3. I am willing and able to exercise with weights, and/or perform cardiovascular exercise three times a week, for at least three months.
4. I am willing and able to participate in a personal training session for a minimum of one time per week for three months.
5. I am willing to refer **Tryad Personal Training** to others upon receiving desired results.
6. I am willing to write a testimonial on how **Tryad Personal Training** helped me achieve my fitness goals.

Please answer the following questions:

1. How did you arrive at your decision to contact **Tryad Personal Training (TPT)**?
2. What is your **primary** reason for contacting **TPT**?
3. What methods have you tried in the past to achieve your goals?
4. Were those methods successful?
5. How committed are you to your success?

Answering yes to any or all of the above statements does not ensure acceptance into the **Tryad Personal Training** program.

Completion of this application does not ensure acceptance into the **Tryad Personal Training** program.

If you answered no to any of the above statements, please provide a brief explanation. A negative response will not necessarily prohibit you from participating in the **Tryad Personal Training** program.

Results are **guaranteed**, based on **acceptance** and **compliance** of the above statements.