

Personal Training & Nutritional Consulting Sessions 2022

*Please **THOROUGHLY** complete each section & sign/initial as indicated.*

Name _____ Trails Recreation Center ID# _____
 Address: _____ Phone # _____
 _____ Email Address _____
 Male Female Date of Birth: _____

Please select:

Adult: (age 18-61) **Youth:** (age 13-17) **Senior:** (62+)
 Resident Non-resident Resident Non-resident Resident Non-resident

****All Services Must Be Purchased Prior to Scheduled Appointment****

Please check services to purchase:

Single PT Session	\$52 D/\$65 ND
Three PT Sessions	\$144 D/\$180 ND
Five PT Sessions	\$235 D/\$294 ND
Buddy PT 1 Session	\$88 D/\$110 ND
Group PT 3 Sessions- <u>3 people</u> *	\$290 D/\$363 ND
Group PT 3 Sessions- <u>4 people</u> *	\$333 D/\$416 ND
Nutritional Consulting 1 session	\$64 D/\$80 ND
Nutritional Consulting 3 sessions	\$161 D/\$201 ND

*Group PT must be purchased under one client's account.

Pricing listed is for Adults (18-61 yrs). Youth & Senior rates are 16% less. Discount calculated when purchased based on account information.

Please Initial Both Boxes Below

If sessions are not cancelled within our 24 Hour Cancellation Policy (page 3) you will be charged for the session. Please initial that you have read & understand the statement above.
 _____ (initial)

Initial Training Session may include a 30 minute consultation. The consultation may be necessary to further discuss your specific needs, goals and/or health concerns. Please initial that you have read and understand the statement above.
 _____ (initial)

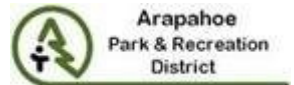
Please circle ALL times you are AVAILABLE:

M T W Th F Sa Su
 Early Morning (5:30 – 8:00) Mid Morning (8:00 – 12:00) Lunch Hour (12:00 – 2:00)
 Afternoon (2:00 – 5:00) Evening (5:00-9:00)

Please Note: A copy of this form will be given to the Fitness Supervisor M-F, and a Trainer/Nutrition Coach will be assigned to you based on your goals, preferences, and time availability. The Trainer/Coach will contact you within 3-5 days to schedule the initial appointment. If you would like a specific trainer, please note that below.

Do you have a **specific trainer** you would like to request? _____
 Do you prefer a male or female trainer? Male Female

Signature _____ **Date** _____



Physician's Name _____ Physician's Phone # _____

Are you taking any medications or drugs? If so, please list medication, dose and reason.

Does your physician know you are participating in this exercise program? Yes No

Please describe any physical activity you do regularly.

Do you now, or have you had in the past:	Yes	No		Yes	No
History of heart problems, chest pain or stroke			Increased blood pressure		
History of heart problems in immediate family			Increased blood cholesterol		
History of breathing or lung problems			Smoking habit		
Muscle, joint, back disorder, or any previous injury still affecting			Any chronic illness or condition		
Hernia, or any condition that may be aggravated by lifting weights			Obesity (more than 20% over ideal body weight)		
Diabetes or thyroid condition			Recent surgery (last 12 months)		
Loss of balance or dizziness			Pregnancy (now or within last 3 months)		
Been advised by physician not to exercise			Difficulty with physical exercise		

Please explain any 'YES' answers _____

The Trails Recreation Center assumes no liability for persons who undertake physical activity. After completing this questionnaire, if you have questions or are in doubt about your readiness to increase physical activity, please consult your doctor prior to beginning your training. This questionnaire may be used for legal or administrative purposes.

I have read, understood, and completed this questionnaire. Any questions I had were answered to my full satisfaction.

Name _____ Trails Recreation Center ID# _____

Signature _____ Date _____

Signature of Parent/Guardian *(for participants under 18 yrs.)* _____

Note: This physical activity clearance is valid for a maximum of 12 months from the date it is completed and becomes invalid if your condition changes so that you would answer YES to any of the questions above.

What are your fitness goals? (check all that apply)

<input type="checkbox"/>	Muscular Strength
<input type="checkbox"/>	Cardiovascular Endurance
<input type="checkbox"/>	Weight Management
<input type="checkbox"/>	Flexibility Improvement
<input type="checkbox"/>	Balance Improvement
<input type="checkbox"/>	Injury Rehabilitation
<input type="checkbox"/>	Sports Specific Training (e.g. Triathlons)
<input type="checkbox"/>	Other

Please list any additional goals you wish to achieve.

Nutritional Consulting

Please attach a list all your supplements and a log of all food and liquid intake (including water) over a 3 day period.

Cancellation Policy

Personal Training/Nutrition Sessions must be cancelled at least 24 hours prior to scheduled session or you will be charged for the session.

Signature _____

Date _____

Signature of Parent/Guardian *(for participants under 18 yrs.)* _____

Trainer Signature _____ Date _____

Liability Release Form

The undersigned recognizes that the use of the Trails Recreation Center Fitness services involves a risk of physical injury including that caused by the negligence of the undersigned or Trails Recreation Staff. The undersigned hereby agrees to assume this risk of injury in its entirety regardless of the cause. The Trails Recreation Center Staff shall not be liable for any injuries or damage to the undersigned, or the property of the undersigned, or be subject to any claim, demand, injury, or damages whatever, including without limitation, those damages resulting from acts of active or passive negligence on the part of the Trails Recreation Center Staff for all such claims, demands, injuries, damages, actions, or causes of action. It is specifically agreed that the Trails Recreation Center Staff shall not be responsible or liable to the undersigned for articles lost or stolen in connection with Trails Recreation Center Staff services.

Please Initial _____

I understand and I am aware that strength, flexibility, and aerobic exercise, including the use of equipment, are potentially hazardous activity. I also understand that fitness activities involve a risk of injury and even death, and that I am voluntarily participating in these activities and using equipment with knowledge of the risks involved. I hereby agree to and accept any and all risks of injury or death.

Please Initial _____

I do hereby further declare myself to be physically sound and suffering from no condition, impairment, disease, infirmity, or other illness that would prevent my participation or use of equipment except as hereinafter stated. I do hereby acknowledge that I have been informed of the need for a physician's approval for my participation in an exercise/fitness activity or in the use of exercise equipment. I acknowledge that it has been recommended that I have a yearly or more frequent physical examination and I have been given permission by my physician to participate, or that I have decided to participate in activity and use of equipment without the approval of my physician and do hereby assume all responsibility for my participation and activities, and utilization of equipment in my activities.

Please Initial _____

I give my consent to the District that they may use any photographs or videotape taken of me while participating in District activities in future promotional or marketing material.

Please Initial _____

I have read the above four (4) statements, and my signature below and initials above verify that.

Name (please print) _____

Signature _____ Date _____

Signature of Parent/Guardian (for participants under 18 yrs.) _____

Trainer Signature _____ Date _____



Amey Schutz, Certified Personal Trainer

Hello, my name is Amey Schutz. I am a Certified Personal Trainer through the National Academy of Sports Medicine (NASM). I have also been a group fitness instructor at The Trails Recreation Center for the past 6 years and truly love the community at Trails. I am passionate about fitness, helping & watching people succeed. We are all capable of more than we know and I am here to help you find that. I am a firm believer that health & fitness can be fun. The sky is the limit so find what you love and you'll find your own fitness journey.

Karmen Davis, Certified Personal Trainer

I have a Bachelor of Science Degree in Corporate Fitness, Exercise Science. I am certified through the National Council on Strength & Exercise (NCSF) as a Personal Trainer and hold certifications in several specialty areas including core training, balance, functional fitness & stretching. I teach a variety of group fitness classes including aqua, core/cardio/stretching, Silver Sneakers and balance classes. I am a firm believer that consistency is key. Little things can make a difference and the all or nothing approach kills goals faster than anything else. Exercise can be many different things so if a gym routine seems overwhelming to you, I can help you find simple solutions you can do anywhere to meet your fitness goals.

Chad Leland, Certified Personal Trainer

I have a Bachelor of Applied Science Degree in Exercise Science and Health Promotion and was certified as a Personal Trainer through National Strength and Conditioning Association (NSCA). I have worked in the fitness industry for over 20 years teaching Boot Camp, Ski Conditioning, Personal Training, Youth Sports Conditioning as well as football, baseball and soccer camps for various schools. I am currently a Strength and Conditioning coach for a local high school. My motivational motto is "getting you on the right path to achieve your full potential - reach those goals baby!"

Sharon Mitchell, Certified Personal Trainer & Orthopedic Exercise Specialist

I have been an ACE Certified Personal Trainer since 1998, and a certified Himalayan Institute yoga teacher since 2000. With an eye toward a more therapeutic form of yoga, following additional teacher training in India, I went back to college to become a licensed Physical Therapist Assistant. My training and experience have equipped me with evidence-based formulas that can help individuals reduce postural imbalances, non-functional movement patterns, and lifestyle habits to promote a more balanced and joyful lifestyle. No two bodies and personalities are the same, and therefore each client's training program is individually customized. Having worked with many clients in the Pittsburgh area for several years prior to moving back to Colorado this past winter, I look forward to empowering people interested in a more balanced lifestyle here.

JoEllen Walden, Certified Personal Trainer & Certified Nutrition Coach

As an active mother of two, a wife, a fitness guru, an accomplished road cyclist; I have a variety of experience under my belt. I am certified as an AFAA Group Fitness Instructor and NAFC Nutrition Coach and Personal Trainer. I have been teaching at Trails for 10+ years. My interest in fitness began with triathlons and has transitioned into road and cross cycling competitions through BRAC. I am passionate about eating real, whole foods and not buying into the latest “fads” and “diets” to improve physique and performance. No more dieting for this gal! I especially enjoy working with families, women focused on getting back into shape pre and post-partum, those in midlife with a renewed interest in healthy living, and of course, all cyclists. I encourage good nutrition and making movement a part of each day. I have hit my own triumphs and hurdles in these personal endeavors and my passion is to help others through their trials.

Calisse Weidner, Certified Personal Trainer

I have been an ACE certified Group Fitness Instructor for 20 years and have taught many types of classes such as Step, Muscle, Kickboxing, Aqua Aerobics and SilverSneakers. I became a certified Personal Trainer in 2006 and love doing both group and individual training. My exercise philosophy is to get people excited about moving their bodies through proper instruction mixed with compassion and humor, and to help them find their niche whether it's belly-dancing, gardening, snowshoeing or mountain climbing! I will ensure all areas of fitness are incorporated by working at your pace. I strongly believe in the psychological benefits that come from sweating and feeling your muscles working, and I hope to help others gain such benefits and feel good in their own skin.