

Flo Fitness Personal Training & Pilates

Personal Information Form

Please complete this form for your Personal Trainer at least 2 days prior to your first scheduled session.

All information received on this form will be treated as strictly confidential. Please fill out the forms ***completely and accurately.***

Name:

Date:	Phone No. H: W: Cell:
DOB:	Age:
Address:	E-mail address:
How did you hear about Flo Fitness Personal Training?	Occupation:
Emergency Contact:	Physiotherapist:
Physicians Name:	Chiropractor:
Blood Pressure (if you know)	Resting Pulse:

Appointment Cancellation Policy

Please provide 24 hours notice if you need to cancel or reschedule your Personal Training appointment.

Clients Signature:

Date:

Flo Fitness Personal Training & Pilates

604-616-6680

flofitness@shaw.ca