Victory 101 Fitness Club LLC Policy and Agreement.

Contract for Personal Training services/ Sessions/Classes

This Contract for Private Training/classes and services (this "Agreement") is made between the below-referenced Client and Company Name as well as the Private Trainer

A Cancellation.

There is 100% No Refund! By signing this form the Client agree's that whenever he/she pays a Payment for a session/class/services and wants to refund that they will not be able to.

We suggest client really read carefully before buying anything so

We suggest client really read carefully before buying anything so he/she can make sure they really want it

B. Location of Session and Session Time

The Client understand that he/she is paying for a class/session/services to be held 100% Online through Zoom or any other Online Platform. No In person services provided.

The Client Also Understand that if he/she is late more than 15 minutes to the session without any prior emergency letter/note/email, The class will be marked NO SHOW, and the personal trainer will Not offer a make up session nor refund for the class.

However, If an emergency note was given before the 15 minutes time frame of the class or during those 15 minutes during the session. No action will be made and the Personal Trainer will give a Make up session which depends on the client schedule and availability.

Please Note, that the Personal Trainer has other classes and obligation to take care off this is why we set this policy into place



C. No Show Policy

The Client Understand that If they do not Show up to class. When we say NO SHOW. We mean you skip class/session and not even show up. you will be charged a \$20 NO show/skip fee for not showing to the session.

If you show an emergency note you wil not pay 20\$, and we will schedule you for a Make up Session for the session you missed.

Liability Related to Private Training Session/Classes.

Client Understands the statement Below:

Participation in a regular program of physical activity has been shown to produce positive changes in a number of organ systems. These changes include increased work capacity, improved cardiovascular efficiency, and increased

muscular strength, flexibility, power and endurance.

I recognize that exercise carries some risk to the musculoskeletal system (sprains, strains) and the cardiorespiratory system (dizziness, discomfort in breathing, heart attack). I hereby certify that I know of no medical problem (except those noted below) that would increase my risk of illness and injury as a result of participation in a regular exercise program.

Lastly, I understand that I will undergo initial testing to determine my current physical fitness status. The testing will consist of completing this health inventory, taking a step test or bicycle ergometer test for cardiovascular fitness, and

being tested for muscular fitness and body composition.

I further understand that such screening is intended to provide Victory 101 Fitness Club LLC

with essential information used in the development of individual fitness programs. I understand that my individual results will be made available only to me. I also understand that the testing is not intended to replace any other medical test or the services of my physician. I will be provided a copy of all test results. I may share the results with

whomever I please, including my personal physician. By signing this consent form I understand that I am personally responsible for my actions during my tenure at Victory 101 Fitness Club LLC, and that I

waive the responsibility of this center if I should incur any injury as a result of my negligence.

COPY POLICY The Client Agree's that He/She will not share Victory 101 Fitness Club



LLC fitness programs to other client or personal trainers.

By signing this Contract and Policy Agreement The Client understands and Agree's to all Policy set by Victory 101 Fitness Club LLC

Name Of Client:

Date:

Sign here:

