



## Personal Training Package

### Registration Process

**Step 1:** Register/purchase your session(s) in person at the False Creek Community Centre or by phone at 604-257-8195.

**Step 2:** Fill out this Personal Training Package and the applicable PAR-Q Form and Consent Form to have ready for your trainer.

**Step 3:** Once you have paid for your sessions and your forms have been completed, you will be contacted within 3-5 business days by your personal trainer. Training can take place any time during False Creek's fitness centre operating hours based on trainer's availability. The referral process will not begin until your forms are completed and payment received. The information completed on this form will be treated as strictly confidential. Please fill out the forms as completely and accurately as possible. This information is essential in assisting your trainer to develop a program that addresses your needs, goals, and interests in a safe and effective manner. **Due to COVID-19, your trainer must call the front desk to reserve a training time slot on designated days/times available. Please note wearing a facemask indoors is mandatory.**

Full Name:	Today's Date:
Age:	Date of Birth:
Address:	Occupation:
Phone:	Email:

Emergency Name:	Emergency Contact:	Relationship:
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Physician's Name:	Physician's Phone:
Physician's Address:	

Trainer Preference:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> None
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Trainer's Name:
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### Scheduling Preference (Circle If Any):

<input type="checkbox"/> Mon	<input type="checkbox"/> Tues	<input type="checkbox"/> Wed	<input type="checkbox"/> Thu	<input type="checkbox"/> Fri	<input type="checkbox"/> Sat	<input type="checkbox"/> Sun
<input checked="" type="checkbox"/> Early Morning 6:30-9:00AM	<input type="checkbox"/> Late Morning 9:00AM-12:00PM	<input type="checkbox"/> Afternoon 12:00-5:00PM	<input type="checkbox"/> After Work 5:00-8:00PM	<input checked="" type="checkbox"/> Evening 8:00-9:30PM		

### The type of trainer I'm looking for is:

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<input type="checkbox"/> If you are between 15 and 69 years old, please fill out attached PAR-Q form.	<input type="checkbox"/> If you are 70 years or older please fill out the PAR Med-X with your physician.	<input type="checkbox"/> If you are pregnant please fill out the PAR Med-X for Pregnancy with your physician.
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## Health and Fitness Questionnaire

1. Are you presently involved in a regular exercise program? If yes, please state the duration, frequency, intensity and type of activities.

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2. How active do you consider yourself?

- |                                    |   |  |  |
|------------------------------------|---|--|--|
| <input type="checkbox"/> Sedentary | <input type="checkbox"/> Lightly Active | <input type="checkbox"/> Moderately Active | <input type="checkbox"/> Highly Active |
|------------------------------------|---|--|--|

Comments:

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3. How would you describe your nutrition habits?

- |                               |                               |                               |
|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> Good | <input type="checkbox"/> Fair | <input type="checkbox"/> Poor |
|-------------------------------|-------------------------------|-------------------------------|

Comments:

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4. How would you characterize your life?

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Highly Stressful | <input type="checkbox"/> Moderately Stressful | <input type="checkbox"/> Low In Stress |
|---|---|--|

Comments:

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5. Please rate your knowledge of exercise and fitness.

- |                               |                               |                               |
|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> Good | <input type="checkbox"/> Fair | <input type="checkbox"/> Poor |
|-------------------------------|-------------------------------|-------------------------------|

Comments:

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6. What type of activities/exercises do you enjoy doing?

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7. What activities would you like to learn?

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8. Please check 1-3 fitness goals:

- |   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Improve cardiovascular fitness | <input type="checkbox"/> Improve muscular strength       | <input type="checkbox"/> Increase flexibility | <input type="checkbox"/> Improve muscular endurance |
| <input type="checkbox"/> Sport-specific training        | <input type="checkbox"/> Weight control/body composition | <input type="checkbox"/> Injury prevention    | <input type="checkbox"/> Injury rehabilitation      |

9. Please provide details of your fitness goals:

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## Personal Training Information

Thanks for choosing one of our False Creek certified Personal Trainers. Please fill out the accompanying Physical Activity Readiness Questionnaire and the general health and fitness questionnaire and consent form. These will help the trainer design a program that will suit your needs. Once you have completed the enclosed information, please return it to your assigned personal trainer.

**Personal Training Packages: One client sessions are 1 hour and two clients' sessions are 1.25 hours.**

### One Client

1 session \$ 44 + GST  
3 sessions \$122 + GST  
5 sessions \$194 + GST  
10 sessions \$375 + GST

### Two Clients

3 sessions \$83 + GST (each client)  
5 sessions \$122 + GST (each client)  
10 sessions \$239 + GST (each client)

### Pre-appointment Guidelines:

- Register/purchase the package that works best for you, and submit the completed personal training package to your assigned personal trainer.
- Your trainer will contact you as soon as possible to set up your first appointment (typically within 3-5 business days).
- The initial consultation may be scheduled before your first workout, or it may be part of your first session.
- Based on your PAR-Q+ form, medical clearance from your physician may be requested prior to participation.
- Due to COVID-19, your trainer must call the front desk to reserve a training time slot on designated days/times available.
- Please note wearing a facemask indoors is mandatory.

### Important Information:

- Admission to the fitness centre is included during sessions with your trainer.
- Sessions expire six months from the date of purchase (unless approved by the Recreation Programmer & Trainer). To get the best results, meet with your trainer regularly.
- There is a 24-hour cancellation policy and you may be charged for missed sessions. One client attending a semi-private workout is a completed workout session. Contact your trainer directly for: late arrival, cancellations, schedule change, etc. Please do not leave messages at the community centre. If you are more than 15 minutes late for your appointment, this will be considered a "No Show". Please discuss this with your trainer if you have any questions or concerns.
- Sessions are not refundable unless a physician note is submitted.
- Wear appropriate workout clothing such as: shorts, t-shirt, and proper athletic footwear.
- Bring a water bottle and a sweat towel.
- The False Creek Community Centre, Vancouver Park Board, and its agents/employees are not responsible for lost or stolen items.

**\*No Show: Our Trainers work on a busy schedule. Unfortunately, if you do not show up within 15 minutes of your scheduled start time, they will be unable to train you because of their scheduling demands.**

I have read and agree to the information above.

**Signature:**

Please submit these completed forms and your PAR-Q form to your assigned personal trainer. Your request will be processed as soon as possible. Thank you.



## Personal Trainer's Biography

### **Keiko**

Keiko is a certified BCRPA Weight Trainer and Personal Trainer. She has a very diverse fitness background and specializes in Pilates, strength training, martial arts/self-defense, older adults, balance and mobility, and group fitness.

### **Finn**

Finn's specialties include rehab injuries, corrective posture, core training, acrobatic training, body weight training, mobility & flexibility training, and TRX training. He has an undergraduate with an emphasis on neuropsychology and human anatomy from Uvic, BCRPA Weight Training and Personal Training, and Older Adult.

### **Scovia**

Scovia is a CanfitPro Certified Personal Trainer. She specializes in strength training for introductory and novice fitness programs as well as Women's only weight training and weight loss programs.

### **Bill**

Bill is a BCRPA fitness specialist in multiple areas including personal training. He has been certified as a personal trainer since November 2019. His area of expertise are strength building and maintenance for the 55+ population, balance and core training, and exercises for post cardiac incidents.

### **Karen**

~~Karen is a BCRPA Personal Trainer, and has experience with Pre and Post Natal and Third Age fitness. Karen has been in the fitness industry for approximately 20 years and holds a Certificate of Health and Fitness from SFU.~~

### **Eric**

~~Eric has been training since 2018 and is a certified NSCA personal trainer. He specializes in Adolescents, Older Adults, Weight Loss, Mobility and Balance, Weightlifting Technique, Strength and Conditioning, Powerlifting, Bodybuilding, Olympic Lifts.~~



## Consent & Release

I, (Full Name)

Age

Of (Address)

**Acknowledges as follows:**

**1. I have applied to participate in;**

- A prescribed exercise program offered by the False Creek Community Centre.
- A program of fitness testing offered by the False Creek Community Centre.

**2. I have completed the "Physical Activity Readiness Questionnaire (PAR-Q)" and**

- Have truthfully answered all questions with a "NO"

**OR**

- Have answered one or more questions with a "YES", and I am attaching to this document a letter from my physician consenting to my participation in the program.

**3. I have been informed and fully understand that the participation in the program may involve certain risks to me and I agree to accept those risks.**

**I therefore give my consent to the False Creek Community Centre, the Board of Parks and Recreation, and its employees and authorized agents to perform the following procedures:**

- A. Anthropometric measurements: girth and skinfolds
- B. Cardiorespiratory tests
- C. Flexibility tests
- D. Strength and muscular endurance
- E. Other – please specify \_\_\_\_\_

**I waive any and all claims against the False Creek Community Centre, the City of Vancouver, the Board of Parks and Recreation, and their employees and authorized agents and release and discharge them, their successors and assigns, from any and all actions, causes of action, claims and demands which may arise in consequence of my participation in the Fitness Centre program irrespective of whether my death or injuries to me resulted from negligence by the aforesaid parties. This waiver and release is binding on my estate and my heirs.**

Signed in Vancouver, BC this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Signature also of parent or guardian, if necessary