

# Louisville Recreation & Senior Center

## PERSONAL TRAINING

Louisville Recreation & Senior Center, 900 W Via Appia, Louisville, CO 80027

303-666-7400



### Introduction:

Are you new to strength training, wishing to learn more about the cardiovascular equipment, circuit or free weights, or just wanting an exercise program tailored to fit your needs? Consider personalizing your program with the help of one of our certified personal trainers today! Our Personal Training team can benefit people in several ways:

- To provide personal instruction and education in fitness areas.
- To tailor fitness programs to meet individual needs and limitations.
- To help people reach their personal fitness goals.
- To introduce people to a variety of exercise formats.
- To provide Fitness Assessments.

**PACKAGES AND PRICING:** Must PRE-PAY at the front desk. Each training session is an hour.

\*New Prices effective 1/2/20

SESSION	PRIVATE R/NR	SEMI-PRIVATE R/NR*
1 Session	\$50/\$60	\$38/\$48 person
3 Sessions	\$139/\$174	\$111/\$139 person
5 Sessions	\$225/\$281	\$175/\$219 person
10 Sessions	\$438/\$548	\$338/\$423 person

\*Both participants must attend to receive this rate

### PLEASE NOTE:

**Personal training is non-refundable and non-transferable.  
No more than 10 sessions can be purchased at a time.  
Trainers cannot accept cash/tips as a City Employee.**

### **\*\* 24 Hour Cancellation Policy \*\***

**You must give your Trainer 24 hour notice if you need to reschedule a session otherwise you forfeit that session.**

### PAPERWORK:

In order for a trainer to properly determine a safe effective program to meet your needs, lifestyle & preferences, the trainer will need the below paperwork filled out prior to your first meeting.

*This packet contains the following forms:*

- Personal Training Client Form
- Waiver of Liability Form

Based upon your Personal Training Client Form, your trainer may request a Physician's Release. Please understand that Personal Trainers cannot guarantee that you will reach your goals. Their purpose is to try and determine the best programs for the individuals they work with, but certain genetic factors, health factors, and adherence factors can affect progress toward a goal.

## Louisville Recreation & Senior Center - Personal Trainer Bios

### Anastasia B

[anastasia87@rocketmail.com](mailto:anastasia87@rocketmail.com)



Anastasia B. has worked in the fitness industry for 18 years. She is a certified personal fitness trainer and group exercise instructor through the Athletics and Fitness Association of America (AFAA) and holds numerous certifications including Zumba, water, yoga & many more. She worked for about seven years with Marines, Sailors and their dependents at bases in California, Hawaii and Virginia before moving back to the Louisville area in 2012. She specializes in core training, water & land based strength training, endurance and flexibility.

**She specializes in core training, water- and land-based strength training, flexibility and injury recovery.**

### Diana W

[diana@dianawalley.com](mailto:diana@dianawalley.com)



Diana W. is a certified personal trainer and group exercise instructor through the American Council of Exercise (ACE). She also holds a Master Nutrition Therapy certificate and is Board Certified in Holistic Nutrition®. Diana has been a wellness enthusiast for over a decade and her greatest satisfaction comes from having a positive impact on people's lives and seeing their health improve and confidence grow. She specializes in strength training and loves to work with individuals of all ages to build strong, capable bodies.

**She specializes in strength training and loves to work with individuals of all ages, especially older adults, to build strong, capable bodies.**

# PERSONAL TRAINING CLIENT FORM

Name: \_\_\_\_\_ Birthdate/Age: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency contact name and number: \_\_\_\_\_

Preferred method of communication (circle one):    email            phone            text

Days/times available for training: \_\_\_\_\_

\_\_\_\_\_

Number of sessions interested in (circle): 1    3    5    10    continual    unsure

Please list your goal(s) for personal training: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please list any injuries/diseases/conditions you have, past and present: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe your current exercise routine: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*\*\*\*\*TRAINER NOTES BELOW\*\*\*\*\*

## Agreement of Release and Waiver of Liability for the City of Louisville, their Personal Trainer's and their Clients.

Acknowledgement of risk: In registering for the below listed program(s) of the Louisville Department of Parks and Recreation, I realize that participation in recreation programs, fitness classes, sports leagues and other parks or recreation activities are or may be dangerous and do or may involve risks, including but not limited to risks of bodily injury, personal injury, death, and property loss or damage. I realize that these risks include without limitation potential physical injury or death from causes such as use, misuse or malfunction of recreation equipment; vehicle accident; slipping, falling or colliding with objects or other participants, and from a variety of other foreseeable and unforeseeable circumstances connected with parks or recreation activities. By this agreement, I hereby voluntarily agree to assume all such risks of injury, death, loss or damage arising out of or related to my engaging in or spectating at such programs and activities, regardless of cause.

Waiver and Release of Liability: By this agreement, I hereby waive, exempt, release and discharge the City of Louisville, its officers, employees, insurers, instructors, volunteers, officials, coaches, sponsors, partners or representatives, from any and all claims, demands and actions of any kind for any bodily injury, personal injury, death, property damage or other damage or loss that may occur in any way as a result of engaging in or spectating at the above-listed recreation program(s), regardless of whether or not caused by the act, omission, negligence or other fault of the City, its officers, employees or any other of the above-listed persons or entities, or any other cause.

Indemnification: By this agreement, I further hereby voluntarily agree to indemnify and hold harmless the City of Louisville, its officers, employees, insurers, instructors, volunteers, officials, coaches, sponsors, partners or representatives, from and against all liabilities, claims and demands, including any third party claims for injury, death, loss, or damage resulting from my participation, to the extent such liabilities, claims or demands are the result my own negligence or intentionally misconduct, or that of my minor child.

Consent for Publicity and Cancellation Advisement: I authorize and consent to the publication, whether by television, newsprint, written advertisements, website or internet posting or otherwise, of all or any portion of participant's name and any picture or image of participant taken in connection engaging in or spectating at any activity of the Louisville Parks and Recreation Department.

Parent Agreement (For Participant Under 18 Years Old): I acknowledge that I am the parent of the above-named participant as the term "parent" is defined in C.R.S. Section 13-22-107(2)(b), and, in addition to execution of the foregoing on behalf of the participant and myself, I hereby waive and release any prospective claim of the participant against the City of Louisville, its officers, employees, insurers, instructors, volunteers, officials, coaches, sponsors, partners or representatives for negligence, to the extent provided by C.R.S. Section 13-22-107(3), in connection with the participant's engaging in or spectating at the above-listed program(s).

General: I acknowledge and agree that this agreement is intended to be as broad and inclusive as is permitted by the laws of the State of Colorado. If any portion hereof is held invalid, I agree the balance of this agreement shall continue in full force and effect.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Witness \_\_\_\_\_ Date \_\_\_\_\_