



Duke LIFEPOINT HEALTHCARE

828.452.8098

Or inquire within

Service Menu

No more quesswork!

With so much conflicting information out there, getting fit can be a confusing endeavor to many people. Our Personal Trainers are here because each has a true passion for the benefits of fitness and exercise, and for helping others find these benefits. Ours is both a short-term AND long-term approach: at first, it's all about establishing a fitness regimen for our client that is manageable, approachable, and non-intimidating. For the longer term, our trainers take the time to educate our client on the steps needed for a healthy and active lifestyle that can be maintained for years to come. HRH&FC Personal Trainers not only maintain certifications with NCCA-accreditation, but their skills are developed further through on-the-job training that arms them with many of the tried-and-true mechanisms used to great success by HRH&FC trainers before them. Program design may include sports enhancement, general strength and conditioning, corrective exercise, and more. Trainers will work to accommodate your schedule.



Personal Training, Single Session

	Member	Non-Member
30 Minute Session	\$25.00	\$30.00
45 Minute Session	\$32.00	\$38.00
60 Minute Session	\$38.00	\$45.00

Personal Training, Ten-Session Package*

	Member
30 Minute Session	\$210.00
45 Minute Session	\$280.00
60 Minute Session	\$350.00

Non-Member \$250.00 \$330.00 \$420.00

Partner Training

	Member	Non-Member
2 people/30 Minutes	\$18/person	\$22/person
2 people/45 Minutes	\$24/person	\$29/person
2 people/60 Minutes	\$28/person	\$34/person

New Member Training Incentive

(Available to first-time personal training customers only, limit one per customer)

	Member
One 60 Minute Session	\$29.00
Two 45 Minute Sessions	\$59.00 [*]
Four 30 Minute Sessions	\$79.00 [*]

*50% Off In-Body 570 Body Fat &

Muscle Mass Analysis when purchased in conjunction with the packages listed above (normal value: \$35 Member, \$45 Non-member)

Direction



PERSONAL TRAINING REGISTRATION FORM

Thank you for your interest in Personal Training! Please fill out the information below. A traine	٩r
matching your availability will then be assigned to you as soon as possible.	

Client Name:		HRH&FC Member, or No?	
		Phone:	
Do you have a preferred t	rainer in mind? If so, plea	ase specify name:	
When are the BEST DAYS	AND TIMES for you to tra	ain? Please list all that apply:	

Please provide us with a brief synopsis of your goals: _____

Risk & Release Statement

In agreeing to participate in activity at Haywood Regional Health & Fitness Center, I affirm that my general health is good, and that I am not adversely

affected by exercise, and that I am capable of performing exercises of a vigorous nature. I am aware of the possibility of accidental or physical injury during exercise programs, swimming activities, and facility usage. In consideration of participating at Haywood Regional Health & Fitness Center, I agree to assume all risks of injury, and I will hold harmless from any and all liability, actions, causes of actions, claims, and demands of any kind and nature whatsoever,

including conditions which I now may have, may arise from , and/or in connection with my willful participation in activities arranged and/or services offered by Haywood Regional Health & Fitness Center, and members of its staff. These terms will serve as a release and assumption of risk for my heirs, executors, and administrators for all members of my family, including any minors.

I agree to abide by the rules and policies of Haywood Health & Fitness Center, and failure to do comply with such rules may result in termination of program. I have read this agreement and understand the activities in which I will be engaged. By providing my signature below, I have agreed to the conditions stated above.

Minors: by signature below, the statement above will be affirmed on behalf of a minor who is participating in activities/services arranged by, or offered through Haywood Regional Health & Fitness Center, by a parent, legal guardian, or person of interest whom is age-18 or above.

Signature

Printed Name of Participant (if Under 18 yrs of age)

Witness (Staff only)