Renaissance Fitness

Personal Training

Name:_____

Address:_____
Street Town State Zip

Home Phone:_____

D.O.B.:_____

Cell Phone:_____

Email:_____

Date of purchase: _____Date Expires:_____

CREDIT CARD INFORMATION

Signed up for:_____ Sessions For $_____

Please Charge my credit card for the dollar amount listed above.

Credit Card Type : _____

Credit Card Account #:_____ Expires _____

Date	*Time*	*Session #*