



# **BWell with RebeccaBoswell**

## ***Inner Fast Girl Training & Movement***

### **Coaching Agreement**

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Client Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Cell Phone (     ) \_\_\_\_\_ Home Phone (     ) \_\_\_\_\_

Work Phone (     ) \_\_\_\_\_ Work Fax (     ) \_\_\_\_\_

E-mail Address \_\_\_\_\_

Birthday \_\_\_\_\_ Referred By \_\_\_\_\_

Parent's Consent (if under 18) \_\_\_\_\_

Program \_\_\_5k \_\_\_ 10k \_\_\_ 13.1 \_\_\_ 26.2 Start Date \_\_\_\_\_

**GROUND RULES:**

1. CLIENT MEETS AT THE SCHEDULED TIME
2. CLIENT PAYS COACHING FEES IN ADVANCE
3. CLIENT COMPLETES ALL INTAKE FORMS AND SIGNS WAIVER
4. CLIENT GETS MEDICAL CLEARANCE IF REQUIRED
5. CLIENT DOES THEIR BEST AND SEEKS ASSISTANCE AS NEEDED

I have read and agree to the above.

Client Signature \_\_\_\_\_ Date \_\_\_\_\_