



The True Way To Health & Fitness

Troy Brown  
Personal Trainer

# Tru2Fitness.com Group Exercise Sign-Up

Name: \_\_\_\_\_ Occupation \_\_\_\_\_

Address: \_\_\_\_\_

Hone Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Date Begin: \_\_\_\_\_ Date End: \_\_\_\_\_

Class: \_\_\_\_\_

Last Physical: \_\_\_\_\_

Are you currently taking any medications? \_\_\_\_\_

If you have not had a physical exam within the last year or currently taking medications for hypertension, high cholesterol, etc., it is important that you get a Medical Clearance filled out by your Physician.

I hereby certify that I have no medical conditions that will limit my participation within the Group Exercise Program.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

May we send you information about upcoming classes, events and specials? \_\_\_\_\_

Would you be interested in Tru2Fitness hosting a fitness event of class at your home or organization you are affiliated with, such as your employer or church? If so, please list: \_\_\_\_\_



*The True Way To Health & Fitness*

**Troy Brown**  
Personal Trainer

---