



Lose 20 lbs. in 6 Weeks and Go To LAS VEGAS.

Imagine today is 6 weeks from now and you look down at the scale and it says 20lbs less than it does today... how excited are you going to be?

Well, 4 out of 5 people reach that goal on our program. So are you ready to get to see the change on the scale?

THE TRANSFORMATION PROJECT

Terms and Conditions

1. You promise to have a **positive attitude** for each workout!
2. You promise that you are willing to **give your best effort** and can follow instructions for 6 weeks. No exceptions.
3. You will deposit the amount of **\$169** to secure your participation in the Transformation Project.
4. You will receive a **trip for two to Las Vegas when you lose 20 lbs. in the 6-week period (42 days) from the date you begin** and give Fit Physique Custom Fitness the right to market and show your results and pictures.

I promise to abide by the Transformation Project terms and conditions (Initial here) _____

\$169 Transformation Project Program - I want to be one of the folks chosen to take action now and register for **The Transformation Project**. I will pay \$169 to secure my participation in **The Transformation Project** and when I lose 20 lbs. in 6 weeks (42 days) from the date I begin I will win a trip for two to **LAS VEGAS**. To be eligible for this offer I will adhere to the simple terms and conditions listed above.

I'm a go-getter and want to firm and tone my entire body! Let's get started! I don't want to procrastinate any more!

I understand that I am not entitled to a money back refund if at any time during the term of my Transformation Project membership I quit participating in, or fail to adhere to the terms and conditions, of the Transformation Project Program.

DATE: _____ SIGNATURE: _____



The Transformation Project Liability Form
Please fill out COMPLETELY and PRINT CLEARLY.

First Name _____ Last Name _____

Phone (_____) _____ I was referred by _____

Address _____ City _____ State _____ Zip _____

E-mail _____ Age _____ Date of Birth _____ / _____ / _____

How Did You Hear About Us: (please be specific) _____

NAME AND LIKENESS RELEASE

I understand that Fit Physique Custom Fitness may photograph or video me prior to, during the delivery of Training, or at the completion of Training and I agree to allow Trainer to use photographs and videos of me, as well as, name and likeness for promotional purposes.

LIABILITY WAIVER RELEASE

MEMBER / PARTICIPANT ACKNOWLEDGMENT AND ASSUMPTION OF RISK AND FULL RELEASE FROM LIABILITY OF FIT PHYSIQUE CUSTOM FITNESS, OR ITS EMPLOYEES, CONTRACTORS, OFFICERS, OR OWNER/S... PARTICIPANT ACKNOWLEDGES THESE PHYSICAL ACTIVITIES INVOLVES THE INHERENT RISK OF PHYSICAL INJURIES OR OTHER DAMAGES, INCLUDING, BUT NOT LIMITED TO, HEART ATTACKS, MUSCLE STRAINS, PULLS OR TEARS, BROKEN BONES, SHIN SPLINTS, HEART PROSTRATION, KNEE/LOWER BACK/FOOT INJURIES AND ANY OTHER ILLNESS, SORENESS, OR INJURY HOWEVER CAUSED, OCCURRING DURING OR AFTER PARTICIPANT PARTICIPATION IN THE PHYSICAL ACTIVITIES. MEMBER FURTHER ACKNOWLEDGES THAT SUCH RISKS INCLUDE, BUT AR NOT LIMITED TO, INJURIES CAUSED BY THE NEGLIGENCE OF AN INSTRUCTOR OR OTHER PERSON, DEFECTIVE OR IMPROPERLY USED EQUIPMENT, OVER-EXERTION OF A MEMBER, SLIP AND FALL BY MEMBER, OR AN UNKNOWN HEALTH PROBLEM OF MEMBER. MEMBER AGREES TO ASSUME ALL RISK AND RESPONSIBILITY INVOLVED WITH PARTICIPATION IN THE PHYSICAL ACTIVITIES, MEMBER AFFIRMS THAT MEMBER IS IN GOOD PHYSICAL CONDITION AND DOES NOT SUFFER FROM ANY DISABILITY THAT WOULD PREVENT OR LIMIT PARTICIPATION IN THE PHYSICAL ACTIVITIES. MEMBER ACKNOWLEDGES PARTICIPATION WILL BE PHYSICALLY AND MENTALLY CHALLENGING, AND MEMBER AGREES THAT IT IS THE RESPONSIBILITY OF MEMBER TO SEEK COMPETENT MEDICAL OR OTHER PROFESSIONAL ADVICE, REGARDING ANY CONCERNS OR QUESTIONS INVOLVED WITH THE ABILITY OF PARTICIPANT TO TAKE PART IN ACTIVITIES. BY SIGNING AT THE BOTTOM OF THIS PAGE, PARTICIPANT ASSERTS THAT HE OR SHE IS CAPABLE OF PARTICIPATING IN THE PHYSICAL ACTIVITIES. MEMBER AGREES TO ASSUME ALL RISK AND RESPONSIBILITY FOR NOT EXCEEDING HIS OR HER PHYSICAL LIMITS.

PARTICIPANT UNDERSTANDS THAT HE/SHE IS NOT ENTITLED TO A MONEY BACK REFUND IF AT ANY TIME DURING THE TERM OF MEMBERSHIP, THE TRANSFORMATION PROJECT MEMBER/PARTICIPANT QUILTS OR FAILS TO ADHERE TO THE TERMS AND CONDITIONS OF THE TRANSFORMATION PROJECT PROGRAM.

DATE: _____ **SIGNATURE:** _____



Fast Action Offer

\$149.25 per month – 8 consecutive months Fit Physique training program. **SEE DETAILS BELOW** (3 sessions per week)

I want to claim 2 months free (\$398 value) with my pledge to myself of training 3 times per week for a 6-month personal training membership! By checking this box and signing below, I agree to allow Fit Physique to charge me \$149.25 for the eight months following the completion of my 6-week transformation program.

\$199 per month – Month-to-Month Jump Start Program (3 sessions per week)

I understand that I have a full 6-Week No Risk Guarantee. If at the end of my 6-week Transformation Challenge Program I am not completely satisfied that Fit Physique is my home for my future fitness needs and don't see the value that this program provides, I am not obligated to continue and simply need to provide Fit Physique with 7 days advance written cancellation notice prior to the completion of my 6-week program. I will not incur any further fees or charges. I will send my notice of cancellation via e-mail to support@fitphysiqueonline.com and this will serve as my receipt of cancellation.

I understand that, except as allowed by this agreement or applicable state law, this agreement is non-cancelable. In the event that I elect to terminate this agreement prior to its expiration date, I agree to provide 30-day written cancellation notice and compensate Fit Physique Custom Fitness an early termination fee of \$300. Said termination fee shall be immediately charged to the payment method listed below.

Automatic Payment Authorization

Client hereby authorizes Fit Physique Custom Fitness, at the end of the completion of this program, charge my credit card, debit card, or checking account on a monthly basis in the amount corresponding to my selected program pursuant to the terms of the cancellation policy stated above in this Agreement. I understand that if I choose to continue past the completion of the Holiday Fat Buster Program, I will be obligated pursuant to the terms of my selected program above. For billing questions, please e-mail support@fitphysiqueonline.com.

Payment Type: Visa MasterCard Discover Checking Acct

Full name exactly as it appears on card: _____

CC #: _____ Exp: _____ CVC Code: _____

Bank Name _____ ABA # _____ Acct. # _____

By signing this Agreement, Client acknowledges that Client has read, understood, and agreed with all terms and conditions on both the front and reverse sides of this Agreement. This Agreement constitutes the entire agreement of the parties and no other agreement or understanding exists between Client and Fit Physique Custom Fitness, an independently owned and operated facility, and Fit Physique Custom Fitness has made no express or implied warranties or representations other than those expressly set forth in this Agreement.

Member Signature _____ Date _____



Help Me Help You By Answering The Questions Below.

Name: _____

Email: _____ Cell Phone: _____

What is it that you're hoping to accomplish? _____

And why is that important to you? _____

What have you tried in the past that didn't work for you? _____

What are you struggling with? _____

Where do you sabotage yourself? _____

If you could snap your fingers and be at your very best tomorrow, what would it look like? _____

Do you want help making that dream a reality? _____

Do you have any injuries or medical conditions that we need to be aware of? Please explain:

What do you think would be the most powerful, most impactful thing I could do for you during our coaching?

What do you think will happen if we DON'T coach together? _____

What do you think would constitute poor coaching on my part? _____

What do you think I should do if you fall behind in the pursuit of your goals or break our agreements?

How will you know if the financial investment for coaching has been a good value? _____