



FOR YOUTH DEVELOPMENT®  
**FOR HEALTHY LIVING**  
 FOR SOCIAL RESPONSIBILITY

**YMCA of Lincoln**

Questions?  
 Contact your branch Health & Wellness Director

# PERSONAL TRAINING PACKAGES



## Beginning Exercise

Learn proper technique as a trainer motivates you to make exercise a habit you enjoy.



## Cardio & Strength Weight Loss

Cardiovascular focus to cut those calories while slowly adding in strength training to boost your metabolism.



## Overcome a Plateau

If you are no longer seeing progress in areas such as weight loss, strength, fitness levels & more, we can help.



## Couch to 5K Race

Comfortably incorporate physical activity and receive guidance steps towards completing your first 5K.

**STRENGTH  
 CONFIDENCE  
 ACHIEVEMENT**



## Upcoming Event/ The Big Day

Trim up and work on losing 5-10 pounds for class reunions, weddings and more!



## Expecting & New Moms

This is for first-trimester moms who want to stay fit & healthy or moms 12 weeks post-natal who would like to lose the baby weight.



## Triathlon Training

Start small or start large, we'll train in all three areas of a triathlon—making those weak areas strong.

Package	Individual Member Rate*	Small Group Member Rate**	Expires
1 session	\$50	N/A	1 month
3 sessions	\$135	\$105/person	3 months
5 sessions	\$220	\$175/person	3 months
10 sessions	\$400	\$310/person	6 months
15 sessions	\$525	\$405/person	6 months
25 sessions	\$825	\$675/person	9 months

\*Non-member rates available. Please check with Wellness Director or Front Desk.

\*\*Small group sessions are available for 2 or 3 members with like goals and are purchased per person. Groups must consist of the same 2-3 members attending each session together for the entire package.

## Program Description

Services provided by a Y Personal Trainer and include but are not limited to:

- Designing an easy-to-follow program for participants
- Specialized strength training programs
- Motivating experienced exercisers to overcome fitness plateaus
- Aiding in weight loss/weight management programs
- Personalized one-on-one training sessions
- Sport-specific training programs
- Assisting participants in setting attainable exercise goals
- Developing healthier and more active habits that work around the participant's schedule
- Easing fears and anxieties to help those new to exercise become more confident and independent

## Registration Information

### REGISTRATION

Complete the Registration Form below. Return this, with payment, to the Front Desk at your Lincoln Y location. Upon registration and payment, a Personal Trainer will contact you via telephone to set up a consultation time.

### YMCA REFUND POLICY

A requested refund 2 business days prior to the start of any activity or class will be issued as 100% credit. After that, a 50% credit will be issued prior to the start date of the activity. After the start of the class, no refunds will be given. If the YMCA of Lincoln cancels a class or program, there will be a full refund.

### PHOTO/VIDEO DISCLOSURE

The YMCA of Lincoln, Nebraska, may take photographs and/or video of its members or program participants for use in print materials or by electronic methods. Your participation in Y programs grants permission for the YMCA of Lincoln to use these in its marketing materials. If you have a concern, please contact the program director for the Y program.

## Registration Form

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Birthdate:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Gender:** \_\_\_\_\_ **Personal Trainer requested:** \_\_\_\_\_

**Best days/times for appointment:** \_\_\_\_\_

**What are your goals for personal training?:** \_\_\_\_\_

**What medical concerns, if any, do you have at the present time?:** \_\_\_\_\_

I (Lincoln Y Member), \_\_\_\_\_, agree to pay in advance for all YMCA Personal Training sessions. I will be in attendance of all scheduled sessions and will give 24-hours notice to my Trainer if I will be unable to attend a session. If I fail to provide appropriate notice, I understand I forfeit the fee I paid for that session. I understand the YMCA Refund Policy for all programs and classes.

**Date:** \_\_\_\_\_ **Signature: X** \_\_\_\_\_

**Package Selected:** \_\_\_\_\_ **# of Sessions Purchased:** \_\_\_\_\_ **Amt. Paid: \$** \_\_\_\_\_

YMCA Staff: Please receipt and return to the Health & Wellness Director.

**YmcaLincoln.org**