

C2K PERSONAL TRAINING FEEDBACK FORM

Please take the time to provide us with some important feedback on your personal training sessions to ensure we are offering you the highest quality of service possible.

CLIENT CONTACT DETAILS

First Name:	<input type="text"/>
Surname:	<input type="text"/>
Mobile Number:	<input type="text"/>
Phone Number:	<input type="text"/>
Email:	<input type="text"/>
Trainer:	<input type="text"/>

How to COMPLETE THIS FORM

1. Complete all the YELLOW fields with as much details as possible
2. You can then either:
 - Fax - Press the PRINT button and fax to:
02 9846 1200
 - Email - Press the SAVE button, save the file to a directory and then email the document to:
c2k@castlehillrsl.com.au
 - Post - Press the PRINT button and post to:
**C2K Fitness Centre
PO Box 25
Castle Hill NSW 1765**

1. Please rate the C2K Personal Training Program.

☐ Needs Improvement ☐ Satisfactory ☐ Very Good ☐ Excellent

2. Has your trainer been prompt contacting you and booking your sessions?

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

3. Have you effectively established your goals and feel you are working towards those goals?

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

4. What areas could the trainer improve to make the sessions more effective for you?

5. What areas would you like your trainer to emphasis more or less?

6. Has your trainer set you up on a program to do on days when you are not doing a personal training session?

☐ Yes ☐ No

Any Comments regarding your C2K training experience?