



GUEST COURTESY CARD

Name _____ Employer _____

Address _____

City _____ State _____ Zip _____

Primary Phone _____ Cell Phone _____ Email _____

Age: ____ Male: ____ Female: ____ Marital Status: Single: ____ Married: ____ Children? ____ Yes ____ No

Have you ever been here before? ____ Yes ____ No

HOW DID YOU HEAR ABOUT Fitness Evolution?

____ Referred by _____

____ Television

____ Radio (which Station) _____

____ Newspaper

____ Direct Mail

____ Drive by/Walk By

____ Word of Mouth

____ Other _____

Is the club Close to:

____ Home ____ Work ____ Both

What time of day will you be working out?

____ Morning ____ Afternoon ____ Evening

What is your current level of exercise?

____ Inactive ____ Somewhat Active ____ Active

1 2 3 4 5

What are your primary fitness goals?

By when do you want to accomplish your goals?

How long have you been thinking about this?

What made you decide to get started today?

Why is this important to you

Have you discussed this with your spouse/significant other?

Do you have a customized program to reach your goals?

On a scale of 1-5 how important is it for you to accomplish these goals?

WAIVER

I accept responsibility for my use of any and all apparatus, facility or service whatsoever, owned and operated at this club at my own risk, and shall hold this club, it's owners, its shareholders, directors, officers, employer's representatives and agents from any and all loss, claim, injury, damage, or liability sustained or incurred by me resulting therefrom. I also give Sta-FIT and its employees the right to contact me by telephone, text or email for the purpose of courtesy follow up, promotional changes, or any other reason.

Signature: _____

Date: _____

Parent or Guardian Signature: _____

Date: _____