



# Mansfield Community Center

*Family, Fitness & Fun!*

## Personal Trainer Request Form

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

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

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

\_\_\_\_\_

Phone/Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Preferred Trainer (optional): \_\_\_\_\_

### Days Available

Monday \_\_\_ Tuesday \_\_\_ Wednesday \_\_\_ Thursday \_\_\_ Friday \_\_\_ Saturday \_\_\_ Sunday \_\_\_

### Preferred Times

Morning: 5:30-9:00 a.m. \_\_\_

9:00 a.m.-12:00 p.m. \_\_\_

Afternoon: 12:00-5:00 p.m. \_\_\_

Evening: 5:00-9:00 p.m. \_\_\_

Known physical limitations or contraindications to exercise: (optional) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please return form to:

Jillian Funk

Health and Fitness Supervisor

10 South Eagleville Road

Storrs/Mansfield, CT 06268

[funkj@mansfieldct.org](mailto:funkj@mansfieldct.org)