

INVOICE

[Trainer Name/Business Name]
[Certification Body & ID]
[Address Line 1]
[Email / Phone]

Invoice #: [000]
Date: [Date]
Due Date: [Date]

Client:

[Client Name]
[Client Address]
[Client Email]

Description of Service	Date/Qty	Rate	Amount
Personal Training Session	[0]	\$0.00	\$0.00
Customized Nutrition Plan	[1]	\$0.00	\$0.00
Monthly Coaching Retainer	[1]	\$0.00	\$0.00

Subtotal: \$0.00

Tax: \$0.00

Total: \$0.00

Payment Instructions: [Zelle, Venmo, or Bank Transfer Details]

Thank you for your hard work and commitment to your fitness goals!