

INVOICE

[Your Fitness Company Name]
[Address Line 1]
[Email / Phone]

Invoice #: [0000]
Date: [MM/DD/YYYY]

BILL TO:

[Corporate Client Name]
[Contact Person]
[Company Address]

PROGRAM PERIOD:
[Start Date] to [End Date]

Description of Services	Qty / Employees	Rate	Amount
Corporate Gym Membership Access	[0]	[\$[0.00]]	[\$[0.00]]
On-site Group Fitness Classes	[0]	[\$[0.00]]	[\$[0.00]]
Personal Training Sessions	[0]	[\$[0.00]]	[\$[0.00]]

Description of Services	Qty / Employees	Rate	Amount
Wellness Workshop / Seminar	[0]	[\$0.00]	[\$0.00]

Subtotal: \$[0.00]

Tax / Adjustments: \$[0.00]

TOTAL DUE: \$[0.00]

Payment Terms: Net [30] Days. Please make checks payable to [Company Name].

Notes: [Insert specialized program notes or bank wire details here.]