

INVOICE

[Invoice Number]

[Trainer/Business Name]

[Email Address]

[Phone Number]

[Website/Social]

BILL TO:

[Client Name]

[Client Address]

[Client Phone]

Date: [MM/DD/YYYY]

Billing Period: [Month, Year]

Due Date: [MM/DD/YYYY]

Description of Service	Date / Qty	Rate	Total
Personal Training Sessions	[0] Sessions	\$0.00	\$0.00
Custom Meal Plan / Nutrition Coaching	1	\$0.00	\$0.00
Gym Membership / Facility Fee	-	\$0.00	\$0.00

Subtotal: \$0.00

Tax / Fees: \$0.00

GRAND TOTAL: \$0.00

Payment Instructions:

Please make payment via [Zelle / Venmo / Bank Transfer / Cash].

Account Details: [Information Here]

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