

WORKOUT SESSION ESTIMATE

Date: [Date]
Estimate #: [Number]

Trainer:

[Trainer Name/Company]

[Address]

[Email/Phone]

Client:

[Client Name]

[Address]

[Email/Phone]

Description	Qty/Hrs	Rate	Amount
Personal Training Session - [Type/Length]	[0]	[\$[0.00]]	[\$[0.00]]
Customized Nutrition Plan	[0]	[\$[0.00]]	[\$[0.00]]
Fitness Assessment & Consultation	[0]	[\$[0.00]]	[\$[0.00]]

Subtotal: \$[0.00]

Tax: \$[0.00]

Estimated Total: \$[0.00]

Notes: This is an estimate for services. Final pricing may vary based on session frequency and modifications to the training program. Estimate valid for 30 days.