

INVOICE

#INV-0000

[Trainer/Gym Name]
[Street Address]
[City, State, Zip]
[Email/Phone]

BILL TO:

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

Date: [Date]
Due Date: [Date]
Subscription Period: [Start] - [End]

Description	Qty/Sessions	Rate	Amount
Personal Training Monthly Subscription - [Tier Name]	1	\$0.00	\$0.00
Additional Add-on: [Item Name]	0	\$0.00	\$0.00

Subtotal: \$0.00
Tax (0%): \$0.00

Total: \$0.00

Payment Instructions:
Please remit payment via [Payment Method: Bank Transfer/Zelle/Card].

Subscriptions auto-renew on the [Day] of every month unless cancelled 7 days prior.

Thank you for your commitment to your fitness goals!