



Katz JCC Personal Training Survey

Let us know what you are thinking! Your feedback is important to us!

Please rate each question below and feel free to make any comments about your training experience at the JCC.

Please drop off @ the Health & Wellness Control Desk Attention: Rob Kiewe
Thank you.

	Excellent					Poor				
	5	4	3	2	1	5	4	3	2	1
1. Initial contact after request	5	4	3	2	1					
2. Professionalism	5	4	3	2	1					
3. Knowledge of Trainer	5	4	3	2	1					
4. Instruction (clear/understandable)	5	4	3	2	1					
5. Goals/Expectations of sessions met	5	4	3	2	1					
6. Overall Training experience	5	4	3	2	1					

7. Would you recommend this trainer to somebody else? Yes No

8. Additional Comments/Suggestions: (all replies are kept confidential)

Name (Optional) _____ e-mail _____