

2022/2023 Personal Training Permissions

Riverview offers fitness support and instruction in a 1:1 setting to all students. Student knowledge of safe and effective exercise methods will help build the foundation for independent healthy living skills. All personal training sessions are held on-campus and led by a certified fitness professional.

The goals of the program are as follows:

- Learn how to use exercise equipment safely
- Learn how to follow a prescribed exercise program
- Improve movement patterns
- Increase strength, endurance and flexibility
- Build the confidence to exercise independently or in a group setting

Session durations and pricing are listed below:

30 minutes/\$30

60 minutes/\$45

Personal training programs for all students include a pre and post assessment. Based on student schedules and school activities, it is recommended that students limit personal training sessions to twice a week. Should a family feel that a student needs more than two sessions per week, please reach out to the Wellness Coordinator.

Personal training is not included in tuition. Payments are processed using your student's discretionary account (SDA), which is managed by the Travel & Discretionary Account Coordinator. Please ensure that your account has sufficient funds to cover the cost of all of your student's activities.

A Fitness Orientation is offered to all students during the staffed hours of the Cohen Center, dependent on staff availability. Fitness Orientations are used to review exercise equipment use and develop an individualized program for the student. These sessions are offered at no cost to parents and can also be requested.

For questions please contact Tom Black, Wellness Coordinator,
tblack@riverviewschool.org

Personal Training Authorization

I hereby grant permission for my student to participate in personal training as organized through Riverview School. I understand that the cost of this service is not included in tuition. I agree to have payment deducted from my student's discretionary account and that their account balance will be maintained in order for payment to be completed.

Student Name: _____

Parent Signature _____ Date: _____

Personal Training Request

Session Duration: 30 min or 60min

Sessions per week: _____ Sessions

Total number of sessions: _____ Sessions or Half School Year or Full School Year

Fitness Background: _____

Additional Notes: _____

Please return form to Tom Black, tblack@riverviewschool.org