

Get Paid to Become a Certified Trainer

Gym Lou's

24 hour fitness



Are you looking for a career opportunity in a fitness related field?

Gym Lou's Train 10 program can **pay for you to become a certified trainer and finance the start-up costs of your very own business as a trainer.** We can do all this while you receive a part-time salary working at the gym.

ABOUT GYM LOU'S

Gym Lou's is a downtown Farmington health facility that is operated by local nonprofit, Capacity Builders Inc. The purpose of this community-based enterprise is to enhance the quality of life and wellness in San Juan County and to create new jobs and economic development opportunities in the fitness industry.

WHAT IS TRAIN 10

Gym Lou's has received a \$600,000 federal grant to conduct Train 10. Through an application process (see back of this flyer), we will select 10 former student athletes and highly motivated community members to participate each year of the grant program.

BENEFITS OF OUR PROGRAM

As a participant, you will receive:

- Free education and certification in a fitness training field that interests you (i.e., insanity, Zumba, pole fitness, personal fitness training, etc.).
- Financial and business startup support to market your skillset to our gym members and the community.
- A \$10,000 salary over your first 6 months of the program to provide 1040 hours of training to the public and apprentice from a personal trainer.

HOW TO APPLY

- Complete the form on the back of this flyer and return to Gym Lou's at 416 Broadway in downtown Farmington.
- Must be 18 to apply and demonstrate that you are highly motivated to work in the fitness industry.

INSTRUCTIONS: This is an application form for individuals interested in becoming a Train 10 participant. If accepted, you will potentially qualify for the many benefits described in this informational flyer. Capacity Builders Inc. will review and score your application in the coming month(s) and inform you of its decision regarding your acceptance into the program. Applying as a participant does not guarantee you placement into the Train 10 program. Prior to your acceptance, you will be asked to sign a contract that commits you to completing your certification in an agreed upon health/fitness trainer field and dedicating the hours outlined in this flyer in order to receive your business start-up salary. Thank you for your interest in the Train 10 economic development program and our nonprofit gym enterprise. All information provided in this application is confidential.

INFORMATION ABOUT YOURSELF Gym Lou's 24 Hour Fitness Train-10 Application

Full Name: _____ Male Female

Address: _____ City: _____ State: _____ Zip: _____

Date of Birth: ___/___/___ Are you over 18? Yes ___ No ___

Home Phone: (____) _____ Cell Phone: (____) _____

Email Address: _____

Facebook: _____

Are you a United States Citizen or otherwise eligible for employment in the USA? Yes ___ No ___

Are you a permanent resident from another country? Yes ___ No ___

If "Yes" please attach a copy of your permanent resident card (green card) to this application

Social Security Number: _____ - _____ - _____

Ethnic/Race Origin:

Hispanic/Latino ____, American Indian ____, Asian ____, Black ____, Pacific Islander ____, White ____, Other (explain): _____

Emergency Contact Name & Phone: _____/_____

Amount of income received in the past year: \$ _____ (we will require a copy of your most recent tax return or pay stub prior to being accepted into the program).

Do you have a current CPR certificate: Yes ___ No ___ (if so, please attach to this application)

Do you have a current AED certification: Yes ___ No ___ (if so, please attach to this application)

Do you have consistent access to a computer and internet connection: Yes ___ No ___

What hours (Sunday through Saturday) would you be available to work at the gym?

Sunday: _____(hours) Monday: _____(hours) Tuesday: _____(hours) Wednesday: _____(hours)

Thursday: _____(hours) Friday: _____(hours) Saturday: _____(hours)

Education

High School Education Institution Name: _____ Graduated: Yes ___ No ___ Expected _____

Address: _____ City: _____ State: _____ Zip: _____

Higher Education Institution Name: _____ Graduated: Yes ___ No ___ Expected _____

Address: _____ City: _____ State: _____ Zip: _____

Background

List and describe your level of interest and participation in community and health activities (i.e., school, volunteer groups, athletics, sports, etc.); and list any awards or honors you received in the past two years.

Why are you applying to Train-10 and what do you hope to gain from attending. Please attach additional pages to communicate your desire to participate in Train 10 and your commitment to community health and fitness through training.

Signature

Signature of Applicant: _____

Date: ____/____/____