





Online Marketing for Personal Trainers

This online course covers techniques and useful channels to help you market yourself better as a Personal Trainer. Helping you to brand yourself and your services better to potential clients.



Workshop Overview:

- How to develop a marketing plan for a Personal Training business.
- How to evaluate different marketing channels, and which ones apply best for your circumstances.
- How to create Social Media accounts and how to use them as a Personal Trainer.
- How to create a website that will function well and help you attract new clients.
- How to ensure your marketing efforts are working effectively.
- Self-paced online course (over 3 months)

Pre-requisite:

Participants must have completed the Certificate IV in Fitness and be registered as a Personal Trainer to be eligible to attain AUSactive CECs from this course.

Upon completion of this course, AUSactive Registrants are eligible to have the Business Development and Marketing knowledge and skill areas acknowledged on their registration profile.

For more information contact Australian Fitness Academy on 1300 AFA FIT (232 348).

To enrol complete details below and email to: info@afa.com.au

Name:			Email:				
Address:			Suburb:	State:	Postcode:		
Phone: (H):		Phone (M):		Phone (W):			
AUSactive Re	egistration Numbe	er:			Date:		
Delivery Option: Online							
Course Cost	\$250						
Visa	Mastercard	Cardholder's Name:		Card Number:			
Expiry:	/	CSV:					

Student Enrolment Form

Date of Birth: /		/	Gender:	Male	Female	Place of Birth (St	tate):		
Next of Kin:			Relation	iship to this pe	rson:	Er	mergency ph numb	er:	
In which country were yo	ou born:			Australia		Other:			
Are you an Australian Cit			Yes		No				
Do you speak a languag	ge other th	nan:		English only		Other:			
How well do you speak E	nglish?			Very Well		Well	Not Well	Not Well at All	
Are you of Aboriginal or	Torres Strc	it Islander	origin?	No		Aboriginal	Torres Strait Island	er	
Do you consider yourself	to have a	a disability,	impairmen	t or long-term	condition?		Yes	No	
If YES, please indicate the areas of disability, impairment or long-term condition:									
Hearing/Deaf Medical			Medical Co Acquired B	l Condition d Brain Impairment		Physical Vision		Intelectual Mental Illness	
Other, please specify:									
Are you still attending se	condary	school?		Yes		No			
What is your highest year	r complet	ed at level	of school?	Yr 12		Yr 11	Yr 10	Yr 9	
In which year did you co	mplete th	nat school l	evelș						
Do you hold a higher qu	alification	Ś							
No, I do not hol Yes, I hold an A Yes, I hold an In Yes, I hold an In	ustralian a	qualificatio al qualifica	n tion and ho				etermine the Austral	ian equialency	
If YES, what qualification	do you h	oldš							
Bachelor Degree		Advan	ced Deploi	oloma Diplon		na	Certificate I	Certificate II	
Certificate III or Trade	9	Certific	cate IV or Te	echnician	Other	, please specify:			
Of the following categor	ries, which	n BEST suits v	your curren	t employment	status? (Cł	noose one only)			
Full-time employee			P	Part-time employee		Self-employed—not employing others			
Employer Unemployed—seeking part-time				Unpaid in family business Unemployed—not seeking work		Unemployed—seeking full-time work			
Which best describes you					-		ovment		
Agriculture, Forestry of				Aining	ipioymeni,		Manufacturing		
Electricity, Gas, Wate				Construction		Wholesale Trade			
Retail Trade				Accommodation and Food Services		d Services	Transport, Postc	al and Warehousing	
Information, Media and Telecommunications			ions R	Rental, Hiring and Real Estate S		te Services Professional, Scientifi		ientific & Technical Services	
Administrative and Su		rvices		Financial and Insurance Services			Public Administration and Safety		
Education and Trainir	ng		H	Health Care and Social Assistance			Arts and Recreational Services		
Other, please specify	/:								
Which best describes yo	uroccupo	ation? (eith				employment)			
Manager	Manager Professional			Technician or Trade		Community and Personal Service Worker		orker	
Clerical & Administrative Worker			Sales Worker		Machinery Operator and Driver				
Labourer		lease spec							
Of the following categor	ries, which				r undertaki				
				existing business		To start my own business		Job requirement	
				er job or promotion another study course		Personal interest or self development Other, please specify:		İ	
	, ,			,		Omer, piedse sp	ecily.		
Do you hold any of the fo	ollowing c)				
				er Concession Card dent partner / child)		Veterans Gold Card		No, I do <u>not hold</u> a Concession Card	
Unique Student Identifier training delivered by a re	. ,			,		I have a U	SI and give AFA autl	horisation to verify my USI.	
If you do not have a USI, <u>default.aspx</u> (Please note					-) Please advis	se of your USI here:		

١,

(name), have read, clarified and understand each of the following:

- Payment Terms & Conditions - including the Payments, Cancellations, Refund and Deferment Policies.

- Student Handbook - including the course information, online learning requirements, participation and assessment requirements, code of conduct, privacy policy and student support services.

I understand that Australian Fitness Academy must be supplied with my Unique Student Identifier (USI) before I am eligible to receive official outcomes of my studies, including a Statement of Attainment, Statement of Results or a Testamur Certificate.

I understand & agree to the terms, conditions and policies outlined in these documents and on the website.

I verify that the information provided above is true and correct.

Name:

Signature:

For Office Use Only:	
Careers Consultant Signature:	
Careers Consultant Name:	
Date: / / /	