

Please fill out the contract as follows:

- 1. Please fill out the form (side 2 and 4) completely by machine.**
- 2. Fields marked with * are mandatory.**
- 3. Please print the form once (side 2, 3 and 4) and send us the file via mail to .**
- 4. From overseas customers we also accept scanned documents as long as the contract and the SEPA document are signed.**
- 5. The contract will be signed by us, too. After this you get a copy of the contract altogether with your invoice and your SEPA mandate number and the SEPA prenotification with the debit date.**
- 6. Please give your SEPA mandate number and the debit date immediately to your bank.**
- 7. If there's no possibility to fill out the document by machine, we accept a legible handwritten form, too.**



Contract

Professional Endurance Team
Susanne Buckenlei u. Matthias Fritsch GbR.

Pleinfelder Straße 12, 91166 Georgensgmünd
Telefon: +49 (0)9172 684 766
Fax: +49 (0)9172 684 769
info@professional-endurance-team.de
www.professional-endurance-team.de

I hereby declare that a contract about individual Trainings planning and coaching is agreed between the company „Professional Endurance Team“ and the following contracting partner: * **necessary input**

Family name* _____ Zip, City, Country* _____
First name* _____ Phone (private)* _____
Date of birth* _____ Phone (mobil)* _____
Street* _____ E-Mail* _____

Trainings packages: Please mark your choice! **Prizes are per month.***

Running time	Get to know package (Gtkp)		Multisport silver	Multisport gold	Individual sport Silber	Individual sport Gold		
	Individual	Multisport	<input type="checkbox"/> 99€	<input type="checkbox"/> 119€	<input type="checkbox"/> 159€	<input type="checkbox"/> 239€	<input type="checkbox"/> 139€	<input type="checkbox"/> 219€
3 Month			<input type="checkbox"/> 139€	<input type="checkbox"/> 209€	<input type="checkbox"/> 119€	<input type="checkbox"/> 179€	<input type="checkbox"/> 119€	<input type="checkbox"/> 189€
6 Month			<input type="checkbox"/> 119€				<input type="checkbox"/> 99€	<input type="checkbox"/> 159€
12 Month								

extension of Gtkp by 3 to 6 months	<input type="checkbox"/> 139€	<input type="checkbox"/> 209€	<input type="checkbox"/> 119€	<input type="checkbox"/> 189€
extension of Gtkp by 9 to 12 months	<input type="checkbox"/> 119€	<input type="checkbox"/> 179€	<input type="checkbox"/> 99€	<input type="checkbox"/> 159€

swimming plans for multisport Gtkp or Silver 20€

1. Begin of training (can be moved until 14days due to eventual startup clearances): * _____

2. **Monthly rate:** * _____ €/ Monat

Discounts 10%:

Participant HHT/ PET Camp

3. **Monthly rate minus discount:** * _____ €/ Monat

4. **Complete Amount (3, 6 or 12 month):** * _____ €

The total amount is collected monthly by rates by direct debit method (SEPA)

**The monthly rates are collected via SEPA debit method on 3rd or 17th of each month. Please fill out enclosed SEPA form for that.
Your mandate number is your customer number on your invoice. On this it is also communicated on which day of month we will collect your rate.**

PET was recommended by Mr./ Mrs.: _____

* _____, * _____
Place _____, Date _____

* _____
Signature, Contracting partner
(For minors, the legal representatives)

Signature, Professional Endurance Team

Terms and conditions (side 3) -----►



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Terms and Conditions

1. Services

This contract is only covering services from the area of individual training plans. These services are specific from the creation, individual training plans based on the personal information of the contractor, and the exchange of information between trainers and contractors, which is defined in the service catalog of the various training packages. The feedback must be in writing. All other benefits of PET are not part of this contract. The plans are sent out for the period of 3-4 weeks in exceptional cases up to 8 weeks per mail. Every new plan will be sent out to the end of the current plan running time, if all necessary current information is delivered on time. Deadline is Monday of the last week of training (unless otherwise agreed).

2. Vertragslaufzeit, Vertragsverlängerung und Kündigung:

- a, The contract begins with the transmission of the first training plans and runs over the selected period.
- b, After the end of the term the contract expires and is not renewed automatically.
- c, In case of price adjustments during a term the contractor does not participate.
- d, The contract can't be cancelled by the contractor during the term, with the exception of paragraph 2e.
- e, In case of illness or injury that would prevent a workout for a long time, the Professional Endurance Team granted early termination. Therefor we need a medical certificate.
- f, The contract expires automatically after the selected period
- g, For an extension of the training a new contract must be filled out.
- h, The Professional Endurance Team reserves the right to terminate contracts before expiring date.

3. Extraordinary termination (anti-doping clause)

The Professional Endurance Team strongly opposes any kind of doping.

We believe the athletic performance, fairly can be achieved, without taking banned substances.

For this reason will we never ask an athlete to use these funds, encourage, or even give it to him.

If one of our supervised athletes are proved and convicted of the use of any form of doping, the contract is unilaterally terminated without notice.

The athlete is with his signature confirming, that he is not in any means or methods served to increase performance.

4. Payment

- a, Payments are made monthly via direct debit. The contractor agrees to the collection procedure with his signature on the SEPA direct debit form.
- b, A non-utilization of services does not remove the obligation to pay regular contributions.
- c, If the contracting party for longer than 4 weeks in arrears, the total amount up to the late payment is immediately due for payment. Up to the payment of the amount represents the Professional Endurance team's performance against the other party.
- d, Bank fees for rejected debit will be charged to the dealer invoice.

5. Changes

Name changes, address changes, changes in bank accounts, etc. Shall be reported to the Professional Endurance team immediately.

6. Health claims

By signing this agreement the contractor confirms that he/she is healthy and able to handle athletic stress.

In addition to this contract there is a medical history form, for training planning, with information filled out by the contracting partner with acute or chronic diseases that could mean athletic limitations. These details are carried out faithfully. The Professional Endurance Team reserves the right to review this information and dissolve the agreement. **We strongly recommend that prior to the completion of a training contract, to do an aerobic fitness of both internal medicine physician, as well as a orthopedic test.**

7. Legal responsibility

The Professional Team Endurance will not be liable for any accident, injury or overloads occur during exercise that are planned except those caused directly by a coach by intent or negligence.

8. Legal validity

If any of the provisions above should be legally invalid, the contract shall continue with the remaining provisions.

The invalid provision will be replaced by that statutory provision, to the intended result is the closest.

In addition to the provisions for the training plan are the rest of the AGB Terms and Conditions valid. These can be viewed at the offices of Professional Endurance team or on their website.

Jurisdiction

The jurisdiction for both parties is Schwabach.

I have made myself familiar with the terms and conditions and I agree with this.

SEPA direct debit mandate side 4



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SEPA Direct Debit Mandate

Name of the creditor: Professional Endurance Team, Susanne Buckenlei und Matthias Fritsch GbR	
Address of the creditor:	
Street: Pleinfelder Straße 12	
Postal code and city: 91166 Georgensgmünd	
Creditor identifier: DE49ZZZ00000013249	
Mandate reference (to be completed by the creditor, corresponding to the customer number on your invoice):	
Authorisation statement: By signing this mandate form I authorize the creditor (name see above) to send instructions to my bank to debit my account an (B) my bank to debit my account in accordance with the instructions from the creditor (name see above).	
Note: As part of my right, I'm entitled to a refund from my bank under terms and conditions of my agreement with my bank. A refund must be claimed within 8 weeks starting from the date on which my account was debited.	
Type of payment: <input checked="" type="checkbox"/> Recurrent payment <input type="checkbox"/> One-off payment	
Name of debtor(s) *	
Address of debtor(s)	
Street and number: *	
Postal code and City: *	
Country *	
IBAN of debtor(s): *	
SWIFT BIC: *	
City: *	Date (TT/MM/YYYY): *
Signature of debtor(s) *	