



Registration Instructions

Welcome to the Rapid Results Weight Loss Program. These are the instructions for making sure that we receive everything that we need to process your registration. Please contact us if you have any difficulties or questions. It is our goal to make this process as simple as possible. These things need to be received by our office in order to schedule your startup orientation with your coach:

Step One: **Your registration**

- **Option one:** You can register online at www.YesRRWorks.com by scrolling down to your desired program and “booking” the orientation time of your choice and complete your online registration form and payment.
- **Option two:** You can download your registration forms as a PDF, fill in the required information and email them back to us.
- **Option three:** You can print the registration forms, fill them out and mail them in. This option will take 3 to 7 days to complete.

Registration includes:

- a. **Program Policy Agreement:** a breakdown of our program requirements
- b. **Registration Form:** giving us some basic information about you and your weight loss history
- c. **Registration Instructions:** How to send your starting weight and photos

Step Two: **Your Registration Payment**

- **Payment Option One:** Online payment at the time of registration
- **Payment Option Two EFT: PayPal, CashApp or Zelle:** If you decide that you do not want to pay online at the time of registration, you can tell us on your online registration form if you prefer to use one of these electronic forms of payment and we will send a payment request. You DO NOT have to have a PayPal account to pay this invoice.
- **Payment Option Three U.S. Mail:** Lastly, you can make your registration payment with a cashier's check or money order payable to **The Good Better Best Corporation and mail to: 30799 Pinetree Rd. #117 Pepper Pike Ohio, 44124**

We do not accept personal or business checks

You will receive

- o a start-up phone orientation with your weight loss coach
- o an easy-to-follow detox plan
- o realistic weight loss goal
- o WE MUST RECEIVE YOUR **STARTING PHOTOS** BEFORE YOUR ORIENTATION
- o YOUR CHALLENGE PAYMENT IS **NON-REFUNDABLE AFTER DETOX HAS BEEN EMAILED**
- o YOU WILL BE **PROSECUTED FOR SHARING OR DISTRIBUTING PROGRAM MATERIALS**

By signing below, you confirm that you have read and agree with to these policies and procedures including payment and disqualification policies.

Participant's signature & Today's Date



Registration Form

Basic Information

- Name: _____ Date: _____
- Age _____ Height _____ Gender: Male / Female
- Cell _____ Alternate number _____
- Email (print clearly) _____
- Home Address _____ City _____ State/Zip _____
- Emergency Contact: Name _____ phone: _____

Communication

- I am on: Facebook / Instagram under the name _____
- I prefer my coach contact me by: (circle all that apply) Text / Email

Health and Fitness History

- I heard about Rapid Results Weightloss from: _____
- I currently do cardio exercise. Yes / No Weight Train? Yes / No
- I am/ am not currently in another weight loss or fitness training program
Explain _____
- Are you on any medications or under a doctor's care for any reason?

NO ___ YES ___ (explain) _____

Liability Waiver

I hereby waive any and all claims of liability or damages that I may have, or that I might claim to have against The Good Better Best Corporation, their agents, volunteers, contractors, assigns, designees and employees for any injuries, impairments, ailments and or conditions that I may experience as a result of participation in the Rapid Results weightloss program, Rapid Results personal training and any other program offered under the Good Better Best Corporation. Also, by signing below I acknowledge my responsibility to pay the total price of this program regardless of my level of participation. I understand that non-payment may result in collections activities and possible reporting of outstanding debt to the credit bureaus. Must be 18 years or older to sign. We recommend that you consult a physician before starting any nutrition or exercise regimen. Sign below to acknowledge that you agree to these terms and conditions.

Participant sign _____ date _____