

YoPi Client Information Intake Form - Spirit Walk LLC. Nicolle Zultowski L.Ac., LMT, RYT, RPT

Name: (please print) _____ Telephone: _____

Address: _____

Referred by: _____

Occupation: _____ male female

In Case of Emergency: _____

Have you ever done Yoga or Pilates Reformer? Y N

What are 2 main reasons you wish to train in Yoga and/or Pilates Reformer?

Do you have any physical Limitations? Please describe:

Medical Disclaimer

Please consult your own physician or appropriate health care provider about the applicability of any recommendations with respect to your own symptoms or medical conditions as diseases commonly present with variable signs and symptoms prior to attending. The information presented in Spirit Walk LLC. programs should not be relied on to suggest a course of treatment for a particular individual. Always consult with your physician or other qualified health care provider before embarking on a new treatment, activity, diet or fitness program. Spirit Walk LLC. assumes no liability or responsibility for damage or injury to persons or property arising from any use or misuse of any product, information, idea, or instruction contained in the materials provided to you. Spirit Walk LLC. reserves the right to change or discontinue at any time any aspect or feature of programs. **By undersigning, I have reviewed, understand and agree to the above disclaimer.**

Client Signature & Date: _____

Pilates Private Reformer per/session: \$65/45min-1hr	<input type="checkbox"/>	Yoga Private per/session: \$65/45min-1hr	<input type="checkbox"/>
Pilates Private Reformer prepaid 10 sessions: \$550	<input type="checkbox"/>	Yoga Private prepaid 10 sessions: \$550	<input type="checkbox"/>
Mixed YoPi plus per/session: \$65/45min-1hr	<input type="checkbox"/>	Mixed YoPi plus prepaid 10 sessions: \$580	<input type="checkbox"/>

age: _____ weight: _____ lbs. height: _____ ft. _____ in.

Instructor Notes:

Client Signature & Date: _____

Guardian Signature & Date: _____

Instructor Signature & Date: _____