**The Pilates Teacher Enrolment Form**

Please take your time to fill out the following as accurately as possible. Should you have any questions or concerns,

please do not hesitate to ask.

**Enjoy your workout!**

**PERSONAL INFORMATION**

|  |  |
| --- | --- |
| Full Name |  |
| Contact #’s | (m) (h) (w) |
| Address |  |
| Email |  |
| Occupation |  |
| Birthdate |  |
| How did you hear about us |  |

**EMERGENCY CONTACT**

|  |  |
| --- | --- |
| Name |  |
| Contact # |  |

**HEALTH & FITNESS**

|  |
| --- |
| Do you have any injuries? |
| Are you pregnant? Previous pregnancies? |
| Are you taking any medication? |
| Do you have any aches/pains? |
| Issues with blood pressure? |
| Operations? |
| Previous Pilates experience? |
| Other physical activities? |
| Any other information? |
| Goals: |
|  |

**If you have answered Yes to any of the above and are prepared to elaborate please do so:**

I understand the various risks associated with an exercise programme & it is my desire to participate. I have not withheld any relevant information regarding my physical condition, which may affect me during or following this session. I agree that (your name) is not responsible for any injuries sustained by me during my exercise session. I hereby release (your name) and all parties involved from any responsibility. I have read the terms & conditions & understand the rules, regulations and policies (overleaf). I agree to adhere to the **24 hour cancellation policy** and will pay for my late cancellations.

**I HAVE READ, UNDERSTOOD AND ACCEPT THE POLICIES**

|  |  |
| --- | --- |
| SIGNATURE: | DATE: |

POLICIES

**TIME:**

* Please arrive at least 5 minutes prior to the start of your class.
* Classes (group , semi, private or other) are 1 hour long.

**FOR YOUR COMFORT:**

* Please provide an accurate physical / medical history in your chart.
* Pilates is a "hands on" approach. If this is uncomfortable for you in any way, please inform us.
* Please wear comfortable workout clothing that will enable your instructor to observe the functioning of your body. Socks are essential.
* Please "silence" your phone. Your courtesy will be appreciated.

**Payments:**

* Payment for classes must be made in advance.
* **CANCELLATIONS MUST BE MADE 24 HOURS BEFORE THE START OF THE CLASS**. Unfortunately, we are unable to forfeit late cancellations or missed classes, so these will be charged.
* Payment can be made by (1) Cash (2) Electronic Transfer (3) Cheque

**COMMUNICATION**

* We value your feedback. Please feel free to email us with any concerns or comments to frances.pilates@gmail.com

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| --- |
| **For customers who choose not to have an induction/assessment session:**  I understand that it is recommended for all clients to have one assessment sessions before moving on to group classes or semi-private sessions. I have willingly declined this and choose not to have an assessment/induction session.  Signature: Date: . |