



Date: ____/____/____

jackandjillyoga@gmail.com

"You are five breaths away from calm."

Welcome to Jack and Jill Yoga! Please fill out the form below.

Name: _____

Address: _____

Email: _____

Phone: _____

Instagram: _____

What does yoga mean to you?

Do you currently practice yoga? If so, what style / type of yoga and how often do you practice?

Y / N _____

If no, what brought you here / reasons to start your practice?

On a scale from 1 - 10, how physically active is your lifestyle? (10 being the most active)

1 2 3 4 5 6 7 8 9 10

What other forms of movement / exercise do you like / do?

Do you have a meditation / mindfulness / journaling practice of your own? If yes, can you describe?

Do you have any limitations, injuries, or health issues I should be aware of / cause concern when practicing yoga?

What is your primary goal for our first session together?

Is there anything else that you'd like to share?

Please read the following information and sign below:

JackandJillYoga is a yoga community playground, offering online and in-person (COVID-Safe) Yoga, Sculpt, and Mindfulness practices for adults, adolescents and children. A space to visit often and share milestones with like-minded individuals to ignite imagination, creativity, and confidence! Our mission at JackandJillYoga is to master an activity that is challenging through PLAY.

With *any* physical activity, there is a risk of injury associated with yoga.

The decision to perform any exercise is up to the individual, _____.
(student name)

The instructor (Jill) does not accept responsibility for problems or injury during or outside class. The participant agrees to take on full responsibility for their actions within the class and shall work within their own limits. If students have any injuries or health concerns, it is their responsibility to notify the instructor

(Jill) before the start of class. If you are in doubt as to your fitness, please consult your physician beforehand.

The instructor (Jill) nor the hosting facility, will not be held liable for any injury, death, loss, or damage to property and / or persons sustained during or as a result of participation in class.

I _____ agree to listen to my body and monitor myself
(sign here)
during every class session.

Those under 18 years of age must have this form signed by a parent or legal guardian.

I agree to the Terms and Conditions as stipulated by JackandJillYoga in addition to our 24-hour cancellation policy. Full payment will be charged / expected if you cancel with less than 24-hour notice. No refunds will be given. Thank you for your cooperation.

Name (PRINT)

Signature

Date

Parent / Guardian (PRINT)

Signature

Date