

## Please Select:

- 1 Person: 60 minutes \$75
- 1 Person: 90 minutes \$110
- 2 People: 60 minutes \$110
- 2 People: 90 minutes \$175
- Group Session: 60 minutes \$110 (2 people) plus \$10 for each additional person)
- Group Session: 90 minutes \$175 (2 people) **plus** \$10 for each additional person)

# of students to attend: \_\_\_\_\_

\*Please note a signed Liability and Consent form for each person must be filled out prior to your session. This will be emailed to you after your phone consult and scheduling.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Best time to call to discuss your consult/yoga session? \_\_\_\_\_

What brings you to our studio for yoga classes?  
\_\_\_\_\_  
\_\_\_\_\_

### What BENEFITS are you looking for? (check all that apply)

- |  |   |
|--|---|
| <input type="checkbox"/> Strength training                       | <input type="checkbox"/> Weight management      |
| <input type="checkbox"/> Flexibility                             | <input type="checkbox"/> Increase well-being    |
| <input type="checkbox"/> Balance                                 | <input type="checkbox"/> Injury rehabilitation  |
| <input type="checkbox"/> Stress relief                           | <input type="checkbox"/> Positive reinforcement |
| <input type="checkbox"/> Improve fitness                         |   |
| <input type="checkbox"/> Address a specific health concern _____ |   |
| <input type="checkbox"/> Other: _____                            |   |

### YOGA INTERESTS:

(check all that apply)

- Asana (postures)
- Pranayama (breath work)
- Meditation/Relaxation
- Yoga Philosophy

### LIFESTYLE & FITNESS: I am...

- Sedentary/Very inactive
- Somewhat inactive
- Average
- Somewhat active
- Extremely active



**YOGA EXPERIENCE/GOALS: Have you practiced yoga before?**

- Yes (most recent class)  No
- \_\_\_\_\_

**How often do you practice yoga?**

- Daily  Weekly  Monthly  Never

**Style(s) of yoga you have practiced (check all that apply):**

- Hatha  Anusara  
 Ashtanga  Bikram/Hot  
 Vinyasa/Flow  Kundalini Gentle  
 Iyengar  Restorative  
 Power  Other: \_\_\_\_\_

**What format do you prefer for your session or would you like to discuss your options?**

\_\_\_\_\_

**How would you rate your level of stress?**

	1	2	3	4	5	6	7	8	9	10	
Lowest	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Highest

**PHYSICAL HISTORY**

Please review this list and check those conditions that have affected your health either recently or in the past.

- broken/dislocated bones  anxiety/depression  
 diabetes type 1 or 2  stroke  
 pregnancy  scoliosis  
 muscle strain/sprain  asthma, short breath  
 high/low blood pressure  heart conditions, chest pain  
 surgery  back problems  
 arthritis, bursitis  numbness, tingling anywhere  
 insomnia  osteoporosis  
 seizures  cancer (explain below)  
 disc problems  auto-immune condition\*  
 Other: \_\_\_\_\_

Are you under the care of a medical professional or doctor?

No

Yes (please tell us why)

Have you had any accidents, injuries, surgeries or hospitalizations?

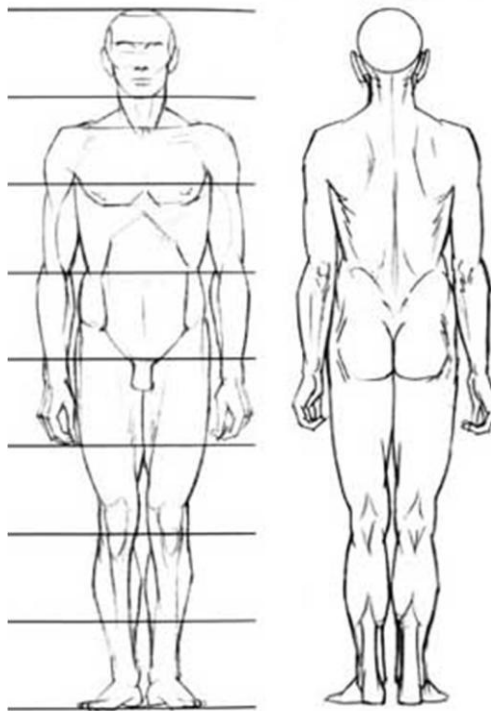
No

Yes (please list)

Please list any medications you have taken in the past 6 months? Why?

Please list any other sports or fitness programs you are currently involved in

**Please note with an X** where you experience any specific bodily discomfort



Tree of Life specializes in Anatomical Yoga instruction. We believe that a strong foundation will create a lifelong practice. We offer private sessions in all of our listed formats. You can find these at [tolyoga.com](http://tolyoga.com) under the "Register for a Class" tab as well as descriptions for each.

Whether you are a seasoned practitioner wanting to fine tune your practice or a beginner who has never stepped on a yoga mat, we are happy to discuss all your options.

**Note:** 90 minute sessions allow us time to include meditations, visualizations, mudra instruction, restorative poses on the bolsters and aromatherapy in savasana (our final resting pose).

\*Please email your completed form to Micki Freeze at

**[beachyoga2@gmail.com](mailto:beachyoga2@gmail.com)**

Micki will contact you within 24 hours to discuss your consult form, schedule your session and create a detailed, customized plan just for you!

Because we take a considerable amount of time to create customized lessons for our private students, all sessions must be paid in full at time of scheduling. Sessions are non-refundable, but we will make every effort to reschedule your session for you if an emergency arises.

\*Preferred Session Dates/Times: \_\_\_\_\_

Tree of Life is a nationally certified Yoga School training qualified teachers to assist you with your private and group classes. Your initial consult & first session will be with Micki Freeze, E-RYT (studio owner/lead instructor) so she can develop a whole body wellness plan that will benefit your needs. She will then choose the most appropriate yoga instructor on her staff to lead you in your journey.

Micki Freeze  
Owner/Lead Instructor  
910-366-3664



**For Admin Use Only:**

Initial Consult Received: \_\_\_\_\_

Phone Consult: \_\_\_\_\_

Session Date: \_\_\_\_\_

Session Time/Length: \_\_\_\_\_

Special Requests/Needs: \_\_\_\_\_

Participants: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Cost: \_\_\_\_\_

Payment Received: \_\_\_\_\_

Session Follow Up: \_\_\_\_\_