

Excel with Grace – Private Yoga Session Questionnaire and Wavier

Dr/Mr/Mrs/Miss/Ms

Date: _____

Name: _____

E-mail: _____

Address: _____

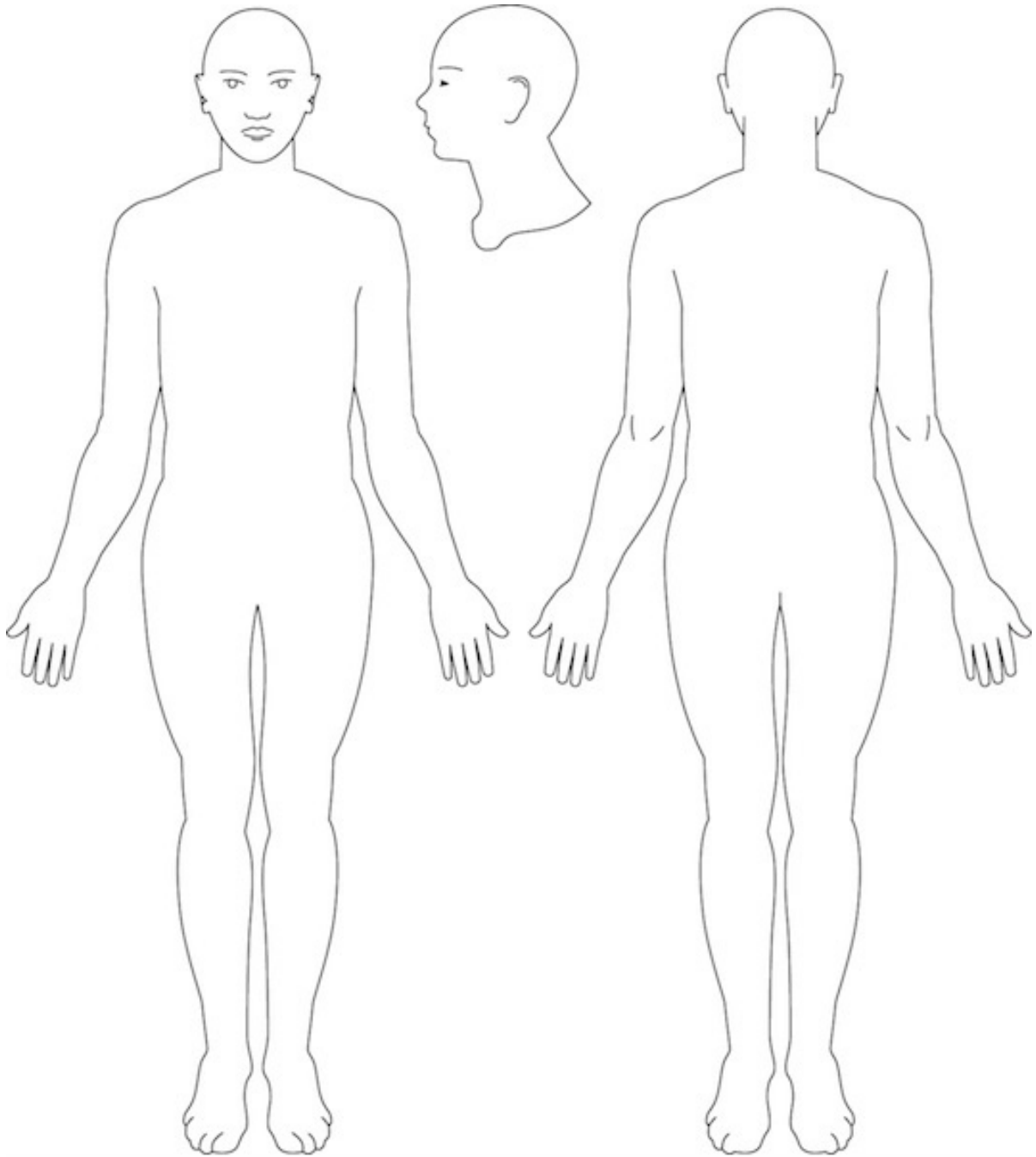
Occupation: _____

Telephone Number: _____

Date of Birth: _____

1. Have you done yoga in the past? If so to what extent?
2. How have your experiences been with yoga been like? Positive or negative.
3. What has motivated you to take this private session?
(Please tick as many reasons as you wish, or add your own underneath)
 - To learn about Yoga (I am new!)
 - To improve physical fitness/flexibility
 - To aid relaxation
 - To aid stress management
 - Interest in the spiritual/philosophical area of Yoga
 - To help improve a medical condition
 - Other
4. If you would like to add anything more specific please do so

Please indicate areas of pain or discomfort on the pictures below



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