



CLIENT INTAKE FORM

Name: _____ Date: _____ DOB: _____

Address: _____

Email: _____ Telephone: (____) _____

Referred by: _____ Occupation: _____

Interested in: Group, Private, or Both (Please Circle)

Preferred days and times of sessions: _____

Fitness Goals: _____

Current Sports/Activities: _____

Injuries or surgeries (dates): _____

Current medications: _____

Emergency Contact: _____ Relationship: _____

Phone Number: _____

Physician: _____ Phone Number: _____



STUDIO POLICIES

- **Appointment Cancellation**

When you book your appointment, you are holding a space on our calendar that is no longer available to our other clients. Please call Rachel as soon as you know you will not be able to make your appointment.

To better serve you and to ensure that we can meet the needs of all our clients, we respectfully request a cancellation notification:

72 Hours in advance to receive a 100% refund.

Cancellations made **48 hours in advance will result in a 50% refund.**

Cancellations made **24 hours or less will be charged the full 100% of the session.**

How to Cancel Your Appointment

If you need to cancel your appointment, please call us at 303-815-4909. We will return your call as soon as possible.

- Please arrive 15 minutes early to your session.
- Please silence cell phones during session.

A current and complete list of our policies is available online. Your signature below, acknowledges that you have read, fully understand, and agree to all our studio's policies.

Sign: _____ Date: _____

Print Name: _____