

Serenity Yoga & Pilates Studio, LLC Yoga & Pilates Training Agreement

Client Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ Work Phone _____

Email Address _____

Emergency Contact Name _____ Phone # _____

How do you prefer to be contacted if there is a last-minute cancellation due to weather or other unavoidable circumstances (please circle): Cell Phone Email Home Phone

How did you hear about us? _____

Training Program Purchase Agreement Terms (please read)

Client understands that Yoga & Pilates punchcards are pre-purchased and will not be refunded or exchanged under any circumstances. Client understands that Yoga and Pilates are therapeutic mind/body exercises that must be done 3-5 times per week to guarantee results. Client understands that all session packages must be used within 1 year from program onset date (unless there are unavoidable circumstances) or remaining sessions will be forfeited. In the case of unavoidable circumstances sessions may be gifted to a friend or family member.

Client understands that cancellations of class may happen due to unavoidable circumstances or weather related problems. In this case I will usually be contacted by email or phone. Please check email on days when the weather is questionable. Classes are subject to changes in schedule or cancellation without notice.

Duet or Single _____ Service Type _____

Number of Sessions _____ Program Onset Date _____

Fee _____

Method of Payment: Cash
 Check (closed accounts or over-drafted, \$30 fee)
 VISA or Mastercard

I have read and understand the above contract and agree to all it entails.

Client _____ Date _____

Trainer _____ Date _____