**YOGA CONSULTATION FORM**

*It is important that your teacher has a full understanding of any pre-existing medical conditions, injuries or recent surgery. For this reason, the questions on this form should be answered thoroughly. You should not knowingly omit any information that may affect your health or safety during your yoga practice.*

**Personal Details: Any information provided on this form will be treated as confidential.**

Name:..............................................................................................................................................Address:........................................................................................................................................... Post Code: .......................................................................................................................................

Tel: ..................................................................................................................................................

Date of Birth: ..................................................................................................................................

Email: ..............................................................................................................................................

*Would you like to join the mailing list?* Y /N

Occupation: .................................................................................................................................... How did you hear about us?...........................................................................................................

Have you practiced yoga before? Y / N. If YES, what experience do you have?............................................................................................................................................... What do you hope to gain from practicing Yoga?.........................................................................

**Emergency Contact: Who should we call in the event of an emergency?**

Contact Name:................................................................................................................................. Relationship: ...................................................................................................................................

Mobile number: ..............................................................................................................................

**General Health: Do you have any medical conditions? Please provide details.**

Arthritis / Osteoporosis / High BP / Low BP / Epilepsy / Pregnancy / Recent surgery/ Other: ...........................................................................................................................................................................................................................................................................................................................................................................................................................................................................

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**Physical Injury’s / Disabilities / Ailments: Are there any areas of concern with your body?**

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**RELEASE & WAIVER OF LIABILITY: Please read carefully**

The practice of Yoga involves physical activity (Asana), breathing exercises (Pranayama), and meditation. As with all physical activity, the risk of injury, even serious or disabling is always present and can not be entirely eliminated. During class, the Teacher will provide verbal cues inviting you to move and breathe in a particular way, these cues are guidelines only. **You should always work to your own ability.**It is your responsibility to consult your GP before beginning a yoga practice, and seek medical consent where necessary. It is also your responsibility to notify the Teacher of any injury or ailment (recent or ongoing) prior to every class. Yoga may at times be challenging, but should never be painful. If at any time you believe something is unsafe for you, or that you are unable to participate due to physical injury or a medical condition, you should stop what you are doing and notify the Teacher immediately. By signing your name below, you confirm that you acknowledge and agree to the terms contained in the above waiver of liability statement. You are aware of (and assume) the risks and hazards of participating in Yoga classes, and agree to assume full responsibility for any injuries and/ or damages, which you may incur as a result of your voluntary participation.

**Please tick**✓**, to confirm that you have read the Student information sheet & GDPR Policy:**

Student Name (CAPITALS): .............................................................................................................

Signature: ........................................................................................................................................

Date: .....................................…………………………………………………………………………………………………….

**STUDENT INFORMATION SHEET**

*To achieve maximum enjoyment from your Yoga session, please read the FAQs below.*

**WHAT TO WEAR**

Please wear something comfortable: Gym kit or similar is ideal. Avoid loose clothing that may restrict your vision when bending forward.

**WHAT TO BRING**

A limited number of Yoga mats and a props will be available for use, free of charge.   
If you have your own mat then please do bring it with you. Other useful items to bring include: Bottle of water / Medication (eg Inhaler if Asthmatic) / Jumper (or something cosy) for relaxation/meditation.

**HOW TO PREPARE**

It is advisable not to eat a heavy meal before attending class. As a guideline, allow 2hrs after a light snack, or 4hrs after a heavy meal. Drink plenty of water, come hydrated! Switch off electronic devices; anything that dings, rings or buzzes should be SWITCHED OFF during class.

**PUNCTUALITY**

Please aim to arrive 5-10 minutes before the class starts, allowing time to check-in and pay, remove your shoes and socks, roll out your mat, and gather any props you’ll need for class.  
The class will start promptly at the specified time. To avoid disruption, late attendance is not permitted.

**INJURIES AND CONTRAINDICATIONS**

If you have any medical concerns, are suffering with an injury or medical condition, it is imperative that you seek advice from your GP or healthcare practitioner BEFORE attending a yoga class. If you have an injury or illness, there may be some yoga poses that need to be modified or avoided. Please seek advice from your Teacher before the class starts. It is your responsibility to notify the teacher of any injuries (new or ongoing) before every class. Always work to your own ability and respect the limitations of your body.

**BOOKINGS & CANCELLATIONS**

Class sizes are limited. However, we have no formal booking system to date and have a very relaxed ‘turn up and enjoy’ culture. To check availability/times/dates or any other query’s simply text Angela on 07887818028 or just turn up.  
If you can no longer attend, so we can gather expected class sizes please let Angela know.

**PAYMENT**

Payment will be collected before the class starts. Cash payment or bank transfer only please, (card payment will be available soon). You may wish to take advantage of the savings available by purchasing a CLASS PASS. £40 P/M with access to unlimited classes please contact Angela for further details 07887818028 or [angela.kimberley3@virginmedia.com](mailto:angela.kimberley3@virginmedia.com)

**GENERAL DATA PROTECTION REGULATION (GDPR) POLICY**

**General Data Protection Regulation (GDPR)**

When you make contact, seeking an appointment or general information (via telephone, or email) your details may be stored electronically for a short period of time while your enquiry is being handled.

We will not keep or store your personal details unless we are legally required to do so (if you become a client/ customer).

We will not use your data to advertise products or services, and your details will never knowingly be passed onto a third party.

If you would like more information on how your data is stored or, you would like your personal details deleted, then please contact Angela Kimberley.