

Personal Information

Last Name _____		First Name _____	
Date of Birth _____	Current Age _____	Sex _____	
Street Address _____		City _____	Postal Code _____
Email Address _____		Phone Number _____	
Parent/Guardian Last Name _____		Parent/Guardian First Name _____	
Parent/Guardian Email Address _____		Parent/Guardian Phone Number _____	
Emergency Contact Full Name _____		Emergency Contact Phone Number _____	

Pilates Experience

Please Select Your Level Of Pilates Experience:

- First Time     
  Beginner     
  Intermediate     
  Advanced

Payment Options

<input type="checkbox"/> Pilates Session \$90.00 per class	<u>PAYMENT METHOD</u>	<input type="checkbox"/> <u>IN FULL</u>
<input type="checkbox"/> Introductory Rate For New Clients Only		
<input type="checkbox"/> 3 Class Card \$225 (75.00 per class) Expires 2 months from date of sale	<input type="checkbox"/> Cash <input type="checkbox"/> Credit Card	SUBTOTAL: _____
<input type="checkbox"/> 5 Class Card \$420 (84.00 per class)	<input type="checkbox"/> Debit <input type="checkbox"/> Cheque # _____	GST (5%): _____
<input type="checkbox"/> 10 Class Card \$800 (80.00 per class)		GRAND TOTAL: _____
<input type="checkbox"/> 20 Class Card \$1500 (75.00 per class)		

**\*ABSOLUTELY NO REFUNDS\*** All class card payments are made absolutely non-refundable. Expiration is activated from the date of sale. Should you have unused classes remaining after the expiration date, no extensions, credits or refunds will be given. All Pilates Class Cards Expire 6 Months From The Date Of Sale With The Exception Of Our Introductory Packages.

I have read and understand the above paragraph: \_\_\_\_\_  
 Signed \_\_\_\_\_ Date \_\_\_\_\_

Office Use Only

- SA     MB     GM Lists    \_\_\_\_\_   
  Questionnaire Completed     Waiver Signed