

Request for One-On-One Instruction

First Name _____ Last Name _____

Cell Phone _____ Alternate Phone _____

Email _____ Date of Birth _____

Request is for (choose one) **On-site** instruction at \$150 per hour **Off-site** instruction at \$200 per hour, please list location below

Address _____ Apt _____

City _____ State _____ Zip _____

Have you practiced Iyengar Yoga before _____ If so, where did you study _____

Name of your Instructor(s) _____

Reason for requesting private lessons rather than attending classes _____

Is there a particular Instructor here at the Institute whom you prefer _____

Do you have any conditions the instructor should be aware of (i.e. specific injuries, high blood pressure, cardiac rehab, pregnancy) _____

What days and times are you available for private instruction _____

All fees for private instruction are subject to 24-hour cancellation policy.

For Office Use Only

Client contacted us by Phone Email In Person _____ Date of Request _____

Response(s) to client or attempts to contact: _____

1. Date and time _____ Discussion _____

2. Date and time _____ Discussion _____

3. Date and time _____ Discussion _____

Recommendation _____

Date client informed of recommendation _____ By whom and how _____

If private was approved, with whom _____ Date and time of appointment _____