

## FIT 4 LIFE PILATES

Please print this enrolment form, fill it in and bring it along to your first class, thank you.

Name.....

Mobile Number.....

Email.....

Which classes will you be attending? .....

Have you done Pilates before, if yes where? .....

### Medical Questions:

It is important to check with your doctor before commencing Pilates if you have any special conditions. This is particularly important if you are or recently have been pregnant, or have recently had an operation.

**Do you suffer from back, knee or hip problems?**

**Have you recently had a baby or are pregnant?**

**Have you recently had an operation?**

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### Personal Statement and Waiver

I advise that I do not have any injuries, ailments or conditions which would prevent me from undertaking **Fit 4 Life Pilates** classes and that I take these classes at my own risk. If I have any medical condition stated above I have sought qualified medical advice regarding my ability to participate in this course and am satisfied with that advice. I understand **Fit 4 Life Pilates** instructors are not qualified to provide medical advice. I have answered the questions to the best of my ability.

Signed .....Date .....

### Payment Options

#### By EFT

Electronic Funds Transfer to the following bank account - **please put name, venue and time attending**

Bank: Commonwealth Bank  
BSB: 062 110  
A/C No: 10246725  
A/C Name: Fit 4 Life Pilates

#### By Cheque

Made payable to Fit 4 Life Pilates. Please bring your cheque and form to your first class.

#### By Cash

Please bring your money and form to your first class.

Please bring your form to your first class.