



Pilates by Physiotherapy

Align your Body and Mind



Registration form

General Client Details	Assessed by:
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Title:	Name:	Date of Birth:
Address		
Post Code:		
Telephone:Home		Work:
Mobile:	Email:	Gender:
GP name and Address:		
Please say how you heard of us:		

Pilates Aims

Why have you decided to start Pilates?		
What aspects of your health would you like to concentrate on?		
Core stability	Flexibility	Posture
Strength	Stress management	Relaxation
What are the three main aims you are hoping to achieve with Pilates?		
1.		
2.		
3.		

Lifestyle

What is your occupation?
Does your occupation involve any repetitive movements or prolonged posture? If so, please briefly explain.
What other sports and/or hobbies are you involved in?