

Balance & BlissTM Inc.

Ayurveda • Yoga • Massage

735 17th St. North
St. Petersburg, FL 33713
balanceandbliss.com
enjoyoga.om@gte.net
phone: (727) 823-8743
fax: (727) 820-0486



Client Information

Name _____ Date _____

Home Address _____

City _____ State _____ Zip Code _____

Phone # (home) _____ (mobile) _____ (fax) _____

Email address _____

Date of Birth _____ Place of Birth _____

Occupation _____

Single _____ Married _____ Significant Other _____ Divorced _____

Referred By _____ Primary Caregiver _____

Contact In Case of Emergency:

Name & Relationship _____ Phone # _____

Matters of Concern to be addressed and How Long they have bothered you

1. _____
_____ How Long? _____

2. _____
_____ How Long? _____

3. _____
_____ How Long? _____

I have disclosed any information that may affect the service that I will receive at Balance & Bliss, Inc. I agree to waive, release, and to hold blameless the practitioner, therapist and sponsor of this service for any claim arising out of an injury or for any costs related to injury arising from participation in this service.

Client Signature

Date

Print Name