



HEALTH SCREENING

"Physical fitness is the first requisite of happiness."
-Joseph Pilates

As a boutique fitness studio and wellness center, at Core Integrity Pilates it is our mission to inspire, empower and educate our clients while promoting a balanced lifestyle through the healing power of movement and alternative wellness approaches to proactive health care. We customize every workout to meet you where you are in this season of your life, in your unique body, for your personal fitness and wellness goals. Please share a little insight with us below so that we can best serve you. - Thank you!

Name	Date	
Email		
Phone	Birthday	
Street Address		
City / State / Zip		
Occupation:		
Emergency Contact		
Relationship	Phone:	
1. Have you ever been treated by a physician for ANY of the following? (please check all that apply) heart disease or other heart condition stroke epilepsy diabetes gastric reflux glaucoma orthopedic/joint problems/replacements (hip/shoulder/knee/spine/elbow) osteoporosis arthritis peripheral neuropathy (numbness/tingling/diminished sensation)		
Please elaborate on any issues if desired:		

2.	Are you pregnant? Yes (estimated delivery date:		
3.	Please share any major surgeries and/or injuries.		
4.	Please share any current medications/dietary supplements.		
5.	Current type of physical activity / frequency?		
6.	What specific health and/or fitness goals do you hope to achieve with us?		
7.	7. How hard do you expect/prefer your instructor to push during a workout? (rate on a scale of 1-10; with 10 being the most)		
8.	How did you hear about Core Integrity Pilates? Friend Current Client Social Media Google Search Other (If from a current client, please provide their name so they can receive our referral credit:		

♦ Please advise us immediately if you are experiencing any symptoms of COVID-19; do NOT come to your scheduled appointment if you have been in contact with anyone who has any COVID symptoms. or a fever.

THANK YOU!





LIABILITY RELEASE

March 2021

Release of Liability

In consideration of being allowed to participate in any program at Core Integrity Pilates, whether in the physical studio space or virtually, I the undersigned acknowledges, appreciates and agrees that:

- 1. The risk of injury from activities involved in this program is significant, and while particular rules, equipment and personal discipline may reduce this risk, the risk of serious injury does exist;
- 2. I knowingly assume all such risks, known and unknown and assume full responsibility for my participation;
- 3. I willingly agree to comply with the stated and customary terms and conditions for participation;
- 4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release and hold harmless Core Integrity Pilates, their officials, employees, other participants, sponsors, advertisers, owners and lessors of premises used to conduct the event, with respect to all and any injury, disability, death, loss or damage of property, whether arising from the negligence of the release or otherwise, to the fullest extent permitted by law.

Purchase Policies: Expiration Dates

All expiration dates are FINAL. Please note prior to your purchase; retain all receipts for your records. No refunds/returns/exchanges. (Please choose carefully and just ask us if you have any questions!)

- ◆ CORE CARDS -- expire 180 days/6 months from the date of purchase. All monies on account at that time are null and no longer accessible.
- ♦ INTRODUCTORY PACKAGE (new client special) -- expires 30 days/1 month from the date of purchase.
- ◆ CONTROLOGY VAULT -- 3-month membership; valid for consecutive months only beginning the first of the month purchased. Auto-billed the first of every month. Expires after 90 days; may not be carried over, transferred or shared.
- ◆ SINGLE VISITS (all Private/Duet/Semi-Private sessions) -- must be used within 30 days/1 month of the purchase date.
- ◆ GIFT CERTIFICATES/GIFT CARDS -- available in any denomination; must be activated within 3 months of the purchase date. Once activated, monies must be used within specified period of time for applicable

Purchase Policies: Terms & Conditions

- ◆ CIP reserves the right to offer promotional discounts with expiration and activation parameters different from the aforementioned terms.
- ♦ There is a \$25 NSF on bounced checks.
- ◆ All purchases will be charged to the card on your file in your WL account unless otherwise arranged/approved with CIP managment (owner).
- ◆ No cash/checks accepted at this time for Virtual sessions unless received in person in advance of class registration.
- ◆ Please note all purchases under \$25 on debit/credit card are subject to a \$1 transaction fee.
- ◆ Due to the current unprecedented National and State health emergency, CIP reserves the right to change these Purchase Policies, Terms & Conditions and method of delivery for all instruction at any time, with reasonable notice if possible, at the sole discretion of CIP management (owner).

Cancellation and Enrollment Policies

As a courtesy to our staff and guests we have a **24-hour cancellation policy**. The cancellation policy is in place to minimize disruption to all our clients and as a courtesy to our instructors. Any appointments missed, canceled or changed less than 24 hours in advance will be charged the full price for that session. This applies to all in-studio and virtual sessions.

*** Please SIGN HERE indicating that you have read and fully understand, accept and agree to these terms stated for all purchase policies, terms and conditions and cancellation policies. ***

(Please print clearly)		
Name (printed):		
Signatura	Data	
Signature:	Date:	
Email:		
Phone:	_	

Thank you for choosing Core Integrity Pilates!

We truly are "all in this together." These unprecedented times influence all of us -- let's join together to make it a joyful, valuable experience for each of us.



PHOTOGRAPHY & PUBLICITY RELEASE March 2021



"Every moment of our lives can be the beginning of great things."
- Joseph Pilates

We love to celebrate our client's successes and our community here at CIP! However, we also respect your privacy and understand that not everyone wants their words or images public and used on social media. Please indicate your preference below.

Name	Date	
Email	Phone	
I,, give Core likeness, image, voice and/or appearance as such may be emaudio recordings, digital images and the like, taken or made	nbodied in any pictures, photos, video or	
I agree that <i>Core Integrity Pilates</i> has complete ownership of copyright and may use them for any purpose. These uses include bulletins, exhibitions, social media, website, commercial, repradvertisements and any promotional or education materials in the internet.	clude, but are not limited to, illustrations, rints, reproductions, publications,	
I acknowledge that I will not receive any compensation, etc. for the use of such pictures, etc., and hereby release <i>Core Integrity Pilates</i> and its agents and assigns from any and all claims which arise out of or are in any way connected with such use.		
I have read and understand this consent and release. (Please	check one:)	
I give my consent to <i>Core Integrity Pilates</i> to use my name	e and likeness as stated above	
☐ I DO NOT give my consent to <i>Core Integrity Pilates</i> to use	e my name and likeness as stated above.	
Signature	Date	
Parent (if minor)		