

Welcome to Our Pilates Studio!

To ensure a safe, comfortable, and enjoyable experience for everyone, we kindly ask you to observe the following studio policies:

Arrival and Parking

- Arrival Time: Please arrive <u>5-10 minutes early</u> for your appointment to help you settle in and prepare for your session. Enjoy our reception area until your instructor or other staff member invites you to enter the studio.
- **Parking:** A <u>discounted parking rate of \$3 for two hours</u> is offered to Revelation Bodywork clients. At the ticket booth, just mention you're with Precision Health & Fitness to receive your discount.
- Late Arrival: We understand traffic can be unpredictable. If you're running late, we'll do our best to accommodate you, but please be aware that joining a group class late might not always be possible for safety reasons. Please note that sessions begin and end as scheduled. Late arrivals will result in a shortened session.

Health, Safety and Attire:

- Due to allergies and sensitivities, please help us maintain a clean, hygienic and scentfree space. Please refrain from wearing strong smelling perfumes or scented lotions in the studio.
- **Pre-existing conditions:** Please inform our instructors of any <u>injuries or health conditions</u> that may affect your Pilates practice prior to the start of class. Your well-being is our priority.
- **Reformer Safety:** For your safety and to protect our equipment, please avoid wearing jewelry, watches, or clothing with zippers and studs.
- Attire: For an optimal Pilates experience, we recommend wearing fitted, stretchable attire that covers the body appropriately and allows our instructors to guide your alignment. While grip socks offer added safety, they are not mandatory. Our front desk has a selection available for purchase.

Studio Etiquette:

- Please be ready to start class on time.
- Pilates is a journey of mind-body connection. We kindly ask for **minimal conversation** during classes to maintain a focused and meditative environment for all.
- Help us take care of our equipment by using it responsibly and following the instructor's guidance.

Your Commitment:

• We are dedicated to helping you achieve your fitness goals. Regular attendance and active participation are key to your success!



Booking and Cancellation

- We are so proud of the personalized experience at our studio. For this reason, we ask new clients to start with a private session to best prepare for group classes. This ensures a safe and enjoyable experience for everyone. Instructor may recommend additional privateinstruction if they determine a student requires additional preparation in order to participate safely and successfully in a particular class.
- We understand life can be unpredictable. If your plans change, please let us know at least <u>24 hours in advance</u> to avoid charges.
- Clients who wish to retain a standing appointment during a period of extended leave can choose to continue their Pilates practice remotely via Zoom sessions, prearrange to have a family member or friend attend in their place, or simply pay for the missed sessions to retain their spot.
- All clients must complete a Health Intake Form and Liability Waiver prior to their first visit. These can be found on our website at <u>www.RevelationBodywork.com</u>.
- For convenience, we bill classes weekly, with a credit card attached to your account.

We thank you for choosing our studio for your Pilates journey. Your adherence to these policies helps us provide a high-quality experience for all our clients. If you have any questions or concerns, please feel free to contact us.

I have reviewed the above Studio Policies and Procedures:

Client Signature

Date



Informed Consent and Release of Liability for Pilates

Name	
Address	
Mobile Phone	Home Phone
Email Address	DOB
Referred By:	

- 1. I have been informed and acknowledged that in taking Pilates instruction, I do so at my own risk.
- 2. I understand and am aware that strength and flexibility exercises associated with Pilates exercises is a potentially hazardous activity. I am voluntarily participating in these activities.
- 3. I do hereby declare myself to be physically sound and suffering from no condition, impairment, disease, infirmity, or other illness that would prevent my participation. I acknowledge that I have either had a physical examination and been given my physician's permission to participate, or that I have decided to participate in the activity without the approval of my physician and do hereby assume all responsibility for my participation and activities.
- 4. I acknowledge that I know the price of my class and there is a 24-hour cancellation policy for each class.

I hereby certify that I have read the contents of this Informed Consent and Release of Liability, have received a signed original of the Agreement and the Informed Consent and Release of Liability, and agree to be bound by the reasonable rules and regulations adopted by Revelation Bodywork in connection with the use of it's facilities and equipment. I agree that the foregoing obligations shall be binding of me personally, as well as upon my family and my heirs, executors, administrators, and assigns.

Client Signature	Date
------------------	------



HEALTH INVENTORY

INJURIES/SURGERIES (please list with dates)

For any current injuries or conditions, are you seeing a medical practitioner, and if so, would you like us to contact them regarding your exercise program? Please list names and contact information for practitioner(s)______

Are you currently experiencing pain? ____ Yes. ____ No ____I frequently experience pain

Do you have or have a history of:

- Back Pain
- Neck Pain
- Disc Herniation or other Spinal Injury
- Hernia or Diastasis Recti
- C-Section
- □ Hamstring Tightness
- Sciatica
- Osteoporosis or Osteopenia
- Arthritis
- Pinched Nerve
- Joint Pain or Injury
- □ Joint Hypermobility

Other (Please Specify or give more specific information about any item checked off above)

Is there anything else we should be aware of regarding your health history or overall physical condition as it pertains to your fitness program?



Payment Authorization Form

I hereby authorize Revelation Bodywork, LLC to initiate credit/debit card entries to my credit card account indicated below and to credit the same account accordingly. In the event a credit is made to my account in error, I authorize Revelation Bodywork, LLC to make a correcting entry under the condition that I am notified of said adjustment and upon my request will receive a receipt of such adjustment.

Credit Card Type:

VISA

Mastercard

Amex

CREDIT CARD AUTHORIZED PAYMENT

Card Number			Exp. Date
CVC Code	Billing Zip Code		
Name as Printed on Card			
Street Address			
Email		_Phone	
Signature			Date

Privacy Policy: Revelation Bodywork, LLC is committed to respecting the privacy and safety of the personal information of its clients. Personal and financial information collected is to assist with payment for services and to communicate charges or additions of services to our clients. No personal or financial information is shared with any outside company. Revelation Bodywork, LLC does not sell or rent any information it collects to any outside individual or company.



Revelation Bodywork LLC provides personalized Pilates-based exercise integrated with energy, breathwork and mindfulness practices that are both therapeutic and physically challenging. From the full-time athlete seeking balance in their regimen to those who need a program coordinated closely with their physical therapist or doctor, Revelation Bodywork delivers it all seamlessly.

In-Office Private Sessions Includes Reformer/Tower/Wunda Chair/Step Barrel & Mat with props

55-minute Private Session with Michele	\$150.00
55-minute Private Session with Fotini	\$150.00
55-minute Private Session with Hailey	\$130.00
55-minute Private Session with Lindsay	\$125.00

Private Zoom Sessions (same pricing as above)

We strongly encourage clients to participate in online sessions when attendance at the studio is not possible. Small props are available for sale at the front desk and are easily packable if you wish to take your Pilates on the road with you.

\$275.00
\$275.00
\$250.00
\$250.00
\$90.00 (per student)
\$90.00
\$90.00
\$90.00

Small Group Therapeutic Pilates

No more than 5 students per class. All clients participating in group classes have attended at least one private session to determine readiness to participate in a group class. Instructor may recommend additional sessions to ensure client is prepared to join a class.

55-minute Class with Hailey, Lindsay or Fotini \$50.00