



Align Pilates, LLC  
REGISTRATION & WAIVER

Registration & Waiver for Align Pilates, LLC.:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell number: \_\_\_\_\_ Home number: \_\_\_\_\_

Email: \_\_\_\_\_

I understand that I, \_\_\_\_\_ (print name), Will be participating in a fitness program with Align Pilates, LLC. that will require physical exertion. Although the most common injuries or symptoms associated with exercise involve strains, sprains, dizziness, fainting and/or discomfort in breathing, I recognize that there is a risk of serious injury associated with any fitness program. Consequently, I am cleared to work out and do not require a doctor's note to be in this fitness program with Align Pilates, LLC. Before starting this program, was asked to provide information regarding my health history and any limitations that I may have. I was also asked if I am taking any medications or receiving any medical treatment that might make it unsafe for me to participate in this fitness program. There is no such limitation. I am not using any medication or medical treatment other than those that I listed on the Medical History form. I understand that by signing this statement, I am agreeing not to hold Align Pilates, LLC., or any of it's employees responsible for any bodily injury or property damage that I may suffer as a result of participation at Align Pilates, LLC. As such, I understand and agree that Align Pilates, LLC shall not be liable for any body injury or property damage that may either result either directly or indirectly from my participation in the Align Pilates, LLC program.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***"Pilates is a complete coordination of body, mind, and spirit."***

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Align Pilates, LLC  
MEDICAL HISTORY FORM

Date \_\_\_\_\_

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Occupation \_\_\_\_\_

Please Circle any of the below that apply:

- |                    |                     |                     |
|--------------------|---------------------|---------------------|
| Asthma             | Heart Problems      | Recent surgeries    |
| Cancer             | High Blood Pressure | Restless Leg        |
| Back Pain/problems | Joint Problems      | Scoliosis           |
| Diabetes           | Liver Disease       | Seizures            |
| Chronic illness    | Osteoporosis        | Shortness of Breath |
| Fractures          | Pregnancy           | Smoker              |

Please list your fitness background and what you are currently participating in:

Current medications:

Current therapy or Medical Care:

Anything else I should know about your background & goals for yourself:

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Align Pilates, LLC  
CLASS POLICIES  
**Evolution Studio**  
216 Dominion Rd NE,  
Vienna, VA 22180

Classes last 50 minutes. Please purchase your package in 5, 10, 20, 30 (includes 1 free session), & 50 (includes 2 free sessions), or an Unlimited Group Class Pass.

Group Class: \$40 per student, per session.

Unlimited Group Class Pass: \$322 Monthly

Private Session: \$85 per session

Semi-Private/Duet Session: \$65.

Demos: \$85 each

Payment Methods: Cash, Check, Major Credit Card, Venmo, and PayPal.

Prepaid sessions expire 12 months after purchase, Group Classes booked with 2 or fewer students may be canceled or consolidated,

**Align Pilates uses StudioBookings to purchase and book classes. Please follow these steps to set up your account. Schedule & pay at [bit.ly/apevo](https://bit.ly/apevo)**

1. Create an account
2. Set up your profile
3. Sign digital waiver
4. Purchase class credits
5. Schedule your classes

For a video walkthrough please scan the QR code.



**LATE CANCEL & NO SHOW POLICY:** A cancellation within 24 hours of your class is subject to a \$10 late cancellation fee. If you book a class and don't show up, we cannot refund your credit. You will be subject to a \$35 fee if you are an unlimited pass member. We understand life happens, please reach out to Annabel if there is an emergency (703-728-0651)

**CELL PHONE POLICY:** Please be mindful to keep cell phones on silent or vibrate to avoid disturbances throughout classes. If you're expecting a call and need to step out for a minute please let your instructor know before the start of class. These policies are in place to ensure all clients receive the experience and exercise they deserve.

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