

## Yoga with Rose Introductory Session Form

Please feel free to take as much space as you would like to answer these questions. Feel free to refrain from answering anything that you may not wish to disclose. All information will be treated with the utmost confidentiality. Use as much space as you need.

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

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

E-mail: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Emergency Contact Phone Number: \_\_\_\_\_

Date of Birth:

Place of Birth:

Occupation:

Please describe your present overall health:

Please describe your overall mental health:

Please describe any issues of chronic pain in the body:

Please describe your current yoga and/or meditation practice, if you have one:

What is your daily routine:

Are you currently taking any medications? If so, please name them and the reasons you are taking them.

Are you currently in treatment with a mental health professional? If so, is he/she in support of your developing a regular yoga practice?

Do you regularly work with any other complementary medicine practitioners?

Do you have (or have you had in the past) any medical conditions (including, but not limited to, bone, muscle, ligament, tendon problems; heart, lung, high blood pressure, epileptic, diabetic or thyroid conditions) that conceivably could affect your yoga practice?

Please describe any issues you may have with your digestion.

Please describe any eating disturbance you may have.

Do you have any respiratory issues? Asthma? Deviated septum? Allergies?

Please describe any issues you may have with menstruation or peri-menopause/menopause.

Please describe any sleep disturbance you may have.

What do you hope to gain from your Yoga with Rose sessions?

Do you live alone or with others?

Marital Status:

Number and ages of children:

Pets:

Main activities, interests or hobbies:

How do you feel about your work and other vocational interests?

What was your religious background?

Do you currently have a religious affiliation?

Do you currently have a spiritual practice?

How do you feel about your relationships with others, especially major relationships?

How do you feel your family background has affected your current situation?

What are the qualities that you would like to experience in your life that you feel are either missing or need enhancing at this time?

What do you feel is the ultimate purpose or meaning in your life?

Is there anything else you would like me to know?