

OFFICE USE ONLY

CLIENT NAME: _____

1. Class/Retreat Registering For: _____ Instructor: _____

2. Payment Received: _____ Cash _____ Check No. (_____) _____ Credit Card

Island Fusion, LLC • 776 Utsalady Road, Camano Island, WA 98282

Today's Date: _____

Client Health Worksheet

Name: _____ Birthday: _____ Age: _____

Address: _____
(Street) (City) (State) (ZIP)

Email: _____ Phone: [h] _____ [c] _____

Name of Spouse: _____ Names & ages of children: _____

Emergency Contact/Name & Relationship: _____ Phone No.: _____

Referred by: _____

1. Please list any chronic or serious medical conditions/illnesses:

2. Please list any injuries, dislocations, fractures or strains:

3. Do you have any of the following conditions that may limit your physical activity? Please check all that apply (and indicate "L" for left or "R" for right)

- | | | | |
|--|--|---|---------------------------------------|
| <input type="checkbox"/> Ankle/foot injury | <input type="checkbox"/> Bone fracture | <input type="checkbox"/> Shoulder/clavicle injury | <input type="checkbox"/> Arthritis |
| <input type="checkbox"/> Low back pain | <input type="checkbox"/> Wrist/hand injury | <input type="checkbox"/> Arm/elbow injury | <input type="checkbox"/> Tennis elbow |
| <input type="checkbox"/> Knee/thigh injury | <input type="checkbox"/> Hip/pelvic injury | <input type="checkbox"/> Calcium deposits | <input type="checkbox"/> Dizziness |
| <input type="checkbox"/> Nerve damage | <input type="checkbox"/> Upper back injury | <input type="checkbox"/> Head/neck injury | <input type="checkbox"/> Fainting |
| <input type="checkbox"/> Swelling in feet/ankles | <input type="checkbox"/> Other | | |

If **other**, please explain:

4. Has your physician ever advised you against exercise? _____yes _____no

5. Are you presently receiving physical therapy? _____yes _____no
If yes, why?

6. RETREATERS: Do you have any . . .
Special needs? Please explain: _____

Special dietary needs? Check all that apply, please.

vegetarian vegan lactose intolerant

other, please explain: _____