



YOGA YOU SANCTUARY
 235 Liscard Road, Wallasey, Wirral, CH44 5TH
 www.yogayousanctuary.co.uk

TEL: 0151 639 9699



Please complete this form for Pregnancy Yoga Classes

Although not compulsory it would be most helpful if you would kindly complete this information form in order that more individual help and advice may be given if required , if possible and if appropriate.

ALL INFORMATION WILL BE KEPT STRICTLY CONFIDENTIAL

Date.....

Name.....

Address.....

Telephone No.....

Have you done yoga before?.....How long?What type?.....

Your date of birth.....

How many weeks pregnant are you now?.....

Date your baby due?.....

Have you checked with your midwife or doctor to see if it is safe for you to practice pregnancy yoga?.....

Doctors name, address and phone no

Please list any particular problems related to your pregnancy or your general health

If on medication do you have any side effects?

Signed.....