

Name (*first name only*): _____

1. What brings you to this yoga class?
2. Are there particular stressors or situations that increase your level of stress?
3. What health concerns (of any kind) are you dealing with?
4. Do you have any concerns about the class?
5. Is there anything else you want me to know?

NOTE: This information will be kept strictly confidential and will not be retained after this class. Information will be used solely to help ensure class members feel comfortable and safe. Please feel free to share here as much or as little as you want. Or, if you prefer to share this information with me in person, please arrive a few minutes early to the first class. Thank you.