



Confidential Intake

Name:

Address:

Phone and Email:

Age or Birthdate: (optional)

What would you most like to achieve through Yoga therapy?

What is your previous experience with Yoga, meditation, alternative health and healing methods?

If already practicing Yoga:

• How often do you practice? Is your practice regular?

• What aspects do you find most enjoyable?

• What aspects do you find most difficult and challenging?

• Which poses are most difficult and which are easiest?

• What parts of your body do you find to be contracted or sore before or after practice?

• What aspects of Yoga do you incorporate into your daily life, off the mat?

• What changes have you experienced in your life through Yoga practice?

• If you could visualize yourself changed or transformed what would you see?

What would you say is the main challenges (not related to health) that you are facing in your life at the moment?

What kind of work do you do, how do you like it?

Tell me about your family dynamic or related issues that might come up.

What interests or hobbies (outside of Yoga) do you have?

Describe your daily routine (outside of your Yoga practice)?

Would you say that you have a healthy lifestyle?

Do you have a regular exercise program? Describe?

What parts of your body do you notice to be chronically, stiff, sore or contracted?

How is your digestion? Your diet? Your elimination? Do you eat at regular times daily?

Are you currently facing health challenges? If so, what medications are you taking or what kind of medical care are you receiving?

In general, how has your health been throughout your life? In the past have you faced major health challenges?

Describe your breathing patterns or lack of awareness around breathing?

How is your energy level overall?

Do you find time to be outdoors and connect with nature?

Describe your level of stress? What types of situations or people bring on stress for you? What seems to alleviate stress best for you?

How is your sleep? Length, disturbances, light/heavy sleeper, tossing, panic, dreams?

How would you describe your emotional life? Are you comfortable with your feelings and emotions? Are there emotions that are difficult for you to express or that seem difficult to control?

To what extent are you able to step outside of situations and get a wider view of things, like seeing the whole forest instead of just the individual trees?

Do you have a person or people that you can express your deepest inner feelings to? Does it make you feel good to do this?

What things in life give you greatest joy?

Describe your spiritual life and connection to something greater than yourself?

Additional Notes if needed:

Congratulations! You have begun the journey in awakening oneness within yourself from a new level of devotion and curiosity that will inspire, reward, and connect you to the deepest layers of the true YOU.