



*The following information includes instructions for In-Person Evaluations as well as Online Evaluations.
Please skip the info that does not apply to your situation.*

EVALUATION INTAKE FORMS AND INFORMATION

FORMS: Please complete the attached documents, including reading through the studio Policies and Procedures (it's not too painful!), the liability waiver, and the 24-hour cancellation policy. **This page, and the Policies and Procedures, are for your information only – we do not need them back.** Please complete the other two documents and bring them with you, or feel free to scan them and send them back electronically to info@movestudiosdenver.com (sending required for online evals).

LOCATION: MOVE Studios is located at 40 S. Broadway between Ellsworth and Bayaud, directly across the street from Goodwill. There is 2-hr metered parking available immediately adjacent to the studio, and 2-hr non-metered parking available between 1.5 and 3 blocks of the studio (most immediately on the West side of Lincoln between 9am and 3pm). There is a parking map available on our website for your convenience: <https://www.movestudiosdenver.com/contact>

ONLINE EVALS: If you are doing your evaluation remotely, please be sure you have a strong internet connection, and an area that provides room to put your camera several feet away from you so that we can see your full body both lying down and standing. You will be emailed a ZOOM link for the eval. A long space/hallway where you can walk away from and towards the camera, along with a wall that allows you to stand in front with your arms in a “goal post” position are extremely helpful.

BUILDING ACCESS: If you are arriving before 8:00am you will need to **use 2012 to get in the front door from the street.** (We suggest putting this in your phone so that you do not forget it when you need it!) The studio door also remains locked for safety but someone will let you in, or you can ring the doorbell if no one arrives by your appointment time. Bathrooms for changing, etc. are down the hall directly across from the stairs when you enter the building.

WHAT TO WEAR: Please wear reasonably tight-fitting clothing. If you have bike shorts (or at least shorts) that would be great – it is helpful to see knees and legs when observing gait and posture. Feel free to layer anything you want over it, and we'll just take off what we need to when we need to. We prefer socks with sticky grips on the bottom or bare feet when possible.

SHOES: Please note that we have a “no shoes” policy in the studio, which helps us keep the studio floor cleaner for everyone. Particularly if the weather is wet/snowy, we prefer that you leave your shoes in the hallway (there is a coat rack and bench area for this.). If you must bring in wet shoes, please take them off on the rug inside and request a towel to put under them to protect the floor (or the cubbie) and the dry socks of fellow MOVE clients.

PAYMENT: Total cost for the evaluation is \$139 payable by cash, check, Venmo or credit card. You may also pay online in advance of the session, which saves time in our actual appointment.

Email info@movestudiosdenver.com or call us with any questions. More info is available on each instructor's background <https://www.movestudiosdenver.com/team> and you can see what clients are saying about their experiences here on the testimonials page <https://www.movestudiosdenver.com/testimonials>



MOVE Studios Policies and Procedures as of April 1, 2022

COVID 19 PROTOCOLS: As of this date, masks at MOVE Studios are optional. The studio has 2 air cleaners running constantly, windows opened as long as weather permits, and fans moving air constantly. Staff has masks and will wear them upon request, or may be wearing them at any time. Students in classes may be asked to mask up if there is a vulnerable person in the class, and the studio will provide masks for this purpose.

STUDIO ACCESS: MOVE Studios is located in a building with a security system. When entering the building outside of regular business hours (before 8:30am) you will need to use a code on the keypad to the right of the door. Once you receive the code information, please keep it in a safe place where you can access it if you get to the door and it is locked.

ONLINE SCHEDULING: Mindbody Online is the scheduling package used by MOVE Studios and it is a great way to be in charge of your class and appointment schedule, payments and account history. You can also view and book classes on your phone with the Mindbody Connect app available for both iPhones and Androids. Please be sure to complete your profile fully when registering. If you have any questions do not hesitate to contact us.

DURATION OF CLASSES/PRIVATESES: Classes booked for 75 minutes are 55 minutes of contact time with the additional time for transition between clients. Evaluation scheduled for 90 minutes have 85 minutes of contact time.

ARRIVAL: When you arrive at a class, the Mindbody app will automatically check you in when you arrive if you have your location options switched on for your phone. If you have not signed up via the app, or in advance, please be sure to get checked in through your instructor.

SHOES: To keep the floors clean and in good condition we maintain a “no shoes” policy. Please do not wear your shoes past the lobby, or preferably (especially on wet/snowy days) please leave your shoes OUTSIDE the studio door (see coat rack/mats for this). If you are concerned about leaving your shoes, please carry them into the space and place them on a towel to absorb moisture. (Staff may wear shoes that they keep at the studio specifically for daily wear.)

INCLEMENT WEATHER: The studio will remain open as scheduled during inclement weather. If an extreme weather event occurs, an email will be sent out regarding any scheduling changes. Please be sure to opt in to emails when signing up in Mindbody Online to ensure you are on the Constant Contact email list and receive this information.

CANCELLATION POLICY: For the benefit of all clients and staff, it is important that cancellation of appointments and classes be made in a timely manner.

For Private Appointments: Cancellation on private session is required 24 hours in advance of the appointment. Client will automatically be charged for the missed appointment at a rate of 50% for a cancellation within 12-24 hours and 100% for a cancellation inside of 12 hours.

For Classes: All classes require cancellation at least 12 hours in advance. If you fail to appear when you have signed up in advance, you will be charged the full amount for the class. Please plan accordingly.

STAFF CANCELLATIONS: In the event that your instructor becomes ill or otherwise unable to teach at the last minute due to an unforeseen emergency, you will be contacted as soon as possible. If another staff member is available to work with you, you will be given the option to reschedule or to see the alternate staff member.



Scheduled Appt/Class Date: _____

Name: _____ Nickname? _____

Address (street/city/state/zip): _____

Phones: Work _____ Home _____ Cell _____

Email: _____ Referred by: _____

(If referred by a doctor or other person, please share your source's name so we can thank them)

Occupation: _____ DOB _____ Age _____

Emergency Contact Information

Name: _____ Relationship: _____ Phone: _____

Medicalert Conditions? _____

If not referred, how did you find MOVE Studios? (Google, Yelp, signage, etc) _____

Please list any accidents, injuries, pregnancies, significant illnesses/medical treatments, or surgeries including the dates of the events:

Please describe your current movement, athletic, fitness activities:

If your movement activities are currently impaired, please list any previous pursuits:

Please put an X next to any of the following conditions you have now, or have had in the past:

- | | |
|-------------------------------------|-----------------------------|
| Glaucoma _____ | Heart Attack/Problems _____ |
| High Blood Pressure _____ | Diabetes _____ |
| Low Blood Pressure _____ | Asthma _____ |
| Stroke _____ | Dizziness _____ |
| Osteoporosis _____ (T Score? _____) | Depression _____ |

Are you being treated by a doctor or other professional for any conditions above, or any conditions not listed here? If so, please explain:



**INFORMED CONSENT/WAIVER OF LIABILITY/ASSUMPTION OF RISK
for all In-Person and Online Activities**

- 1. I understand and expressly assume all risks of my participation in the programs of movement re-education, strength, flexibility, Pilates and other exercise training and conditioning by MOVE Studios LLC, and I hereby waive, release and forever discharge any and all claims or causes of action which I might otherwise bring against MOVE Studios LLC, its officers, employees, trainees, and contractors with regard to injuries, damages, or losses arising from or relating to my participation in the above-mentioned activities or the use of equipment, props, or machinery in these activities, whether in-person or via Zoom, Skype, Facetime or any online platform.
- 2. I understand and am aware that movement re-education, strength, flexibility, Pilates and other exercise training and conditioning, including the use of fitness equipment of any kind, are potentially hazardous activities. I also understand that these activities involve the risk of injury and possibly even death, especially to people with pre-existing injuries, illnesses or medical disabilities. I am voluntarily participating in these activities and using Pilates and other equipment and machinery with knowledge of the dangers involved, and with the understanding that certain, inherent risks cannot be eliminated regardless of the care taken to avoid injuries. I hereby agree to expressly assume and accept any and all risks of injury or death both in-person and via online sessions.
- 3. I hereby declare myself to be of sound mind and physically suffering from no condition, impairment, disease, infirmity or other illness that would prevent my participation in movement re-education, strength, flexibility, Pilates and other exercise training and conditioning or in the use of Pilates and other fitness equipment and machinery. I also understand that a medical evaluation is advisable before participation in above-mentioned activities. I acknowledge that I have either had a physical examination and have been given my physician's permission to participate, or that I have decided to participate in activity and use of Pilates and other fitness equipment and machinery without the approval of my physician and do hereby assume all responsibility for my participation and activities, and utilization of Pilates and other equipment and machinery both in-person and via online instruction.
- 4. **I understand it is my responsibility to fully inform, and keep fully informed, the MOVE Studios instructors and staff working with me of any physical condition or disability which would prevent or limit my participation in an exercise or physical conditioning program both in-person and online.** I further acknowledge that, while the program may have substantial physical benefits, MOVE Studios practitioners do not engage in diagnosing or treating medical disease or deficiencies.

CANCELLATION POLICY: I understand that all MOVE Studios reserved in-person and online appointments (evaluations and private/semi-private sessions or private classes) are subject to a **24-hour cancellation policy**. This policy is in place for the benefit of all clients and instructors, allowing clients to take a class or private session opening when they become available, and instructors to offer open spots to appointment-seeking clients in a timely fashion.

I hereby acknowledge that failure to cancel any **PRIVATE APPOINTMENT with MOVE Studios prior to the 24-hour window will result in my being automatically charged for the missed class or appointment** at a rate of 50% for a cancellation within 12-24 hours and 100% for a cancellation inside of 12 hours. I further acknowledge that failure to cancel a **CLASS RESERVATION with less than 12 hours notice will be charged at the full rate.**

I acknowledge that all cancellations can be done online up to 24 hours in advance, and appointment cancellations will automatically generate notification to my instructor. **If I am UNABLE to cancel online**, I will notify my instructor directly as soon as possible. **If notification is inside of 24 hours all above policies apply.**

PACKAGE EXPIRATION POLICY: I understand that prepaid packages for classes or private/small group sessions must be used within one year from the date of purchase. **Sessions remaining on a package and not used by the end of that year will be lost.** Refund or transfer requests submitted in writing **prior to expiration** will be honored, minus any credit card fees (if applicable) assessed for processing the return.

I have read, completely understand and fully agree to the policies and release as stated above. Agreement to this Cancellation and Liability Information will act as your continued agreement to all ensuing classes and private sessions whether in person, via Zoom, Skype, Facetime or any other video conferencing tool.

Signature (parent or guardian if under 18 years of age)

Date

PRINT NAME: _____
(include both name of minor and guardian when appropriate)



In-Person COVID-19 Waiver

1. I understand that COVID-19 is reported to be extremely contagious, and it is believed to be spread primarily through the air via person-to-person contact and the droplets present in respiration, along with possible spread through contact with contaminated surfaces and objects (very low risk). Evidence has shown that COVID-19 can cause serious and potentially life-threatening illness and even death.
2. I understand that MOVE Studios is following all of the best practices regarding this virus to the best of their ability in accordance with the Centers for Disease Control, the State of Colorado, and the latest published scientific data and information available. By choosing to participate in-person at the studio, I hereby acknowledge that MOVE Studios cannot prevent me from becoming exposed to, contracting, or spreading COVID-19 while utilizing MOVE Studios' services or premises.
3. I hereby choose to accept the risk of contracting COVID-19 for myself in order to utilize MOVE Studios' services and enter MOVE Studios' premises.

I hereby forever release and waive my right to bring suit against MOVE Studios and its owners, managers, officials, trustees, agents, employees, or other representatives in connection with exposure, infection, and/or spread of COVID-19 related to utilizing MOVE Studio's services and premises. I understand that this waiver means I give up my right to bring any claims including for personal injuries, death, disease or property losses, or any other loss, including but not limited to claims of negligence and give up any claim I may have to seek damages, whether known or unknown, foreseen or unforeseen.

Signature (parent or guardian if under 18 years of age)

Date

PRINT NAME: _____
(include both name of minor and guardian when appropriate)

Updated 4/22/22



DOCUMENT REQUEST ACKNOWLEDGEMENT

LEGAL, MEDICAL AND INSURANCE DOCUMENTATION: Please note that the charts kept by MOVE Studios staff are strictly session notes for the purposes of efficient and effective movement training and education. These are not SOAP notes or other clinically official notes. Furthermore, as allied health professionals, the work we do is not generally included in legal and insurance cases. They prefer to use the clinical notes from medical providers in professions that carry and require licensing. Should you, or your legal or insurance representative, request documentation of any sort from MOVE Studios for the sessions we conduct, please note that **you will be charged at our hourly rate for the time it takes us to create such documentation. This fee is non-negotiable and payment is required before documentation is received.**

I have read and understand the above information involving document requests at MOVE Studios.

Signature (parent or guardian if under 18 years of age)

Date

PRINT NAME: _____

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