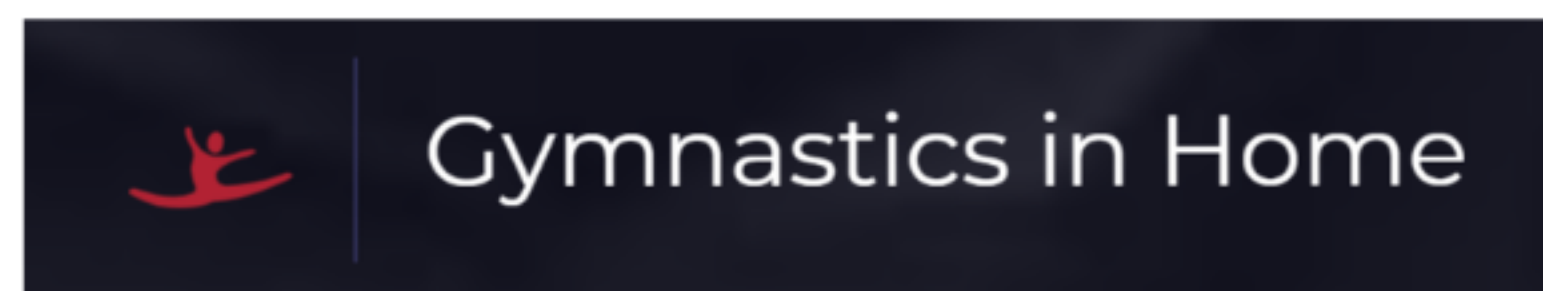


Private Lesson Intake Form



Date of Intake: _____

Taken By: _____

Participant Name*circle one (Adult/Child):	Age/Date of Birth:
Email Address:	Phone Number:
Parent/Guardian Name (if filling out for a child):	Zip Code (Required for In-Home Requests Only):
Participants Athletic Goal:	In-Home or BHGC/LAGC Location:
* Preferred Day of Lesson:	* Preferred Time:
Coach Preference (e.g., female, specific coach name, etc.):	Preferred Start Date:
Referred to (Add Coaches' Name):	