



WOMEN FOR WOMEN'S HEALTH WORKSHOP

Empowering women to make progressive health choices

Pre-Workshop Questionnaire

We are delighted that you have chosen to attend our Women for Women's Health (WfWH) Workshop. We hope you will enjoy the day and find it useful.

In order to be able to focus on your needs and requirements for the day, we would be grateful if you could help us by completing a short survey.

Please fill in and email it back to us in order to secure your first choice of active sessions and also if free consults are available. (First come first serve basis with payment and online booking)

Name:									
Contact Details:									
What age group are you:									
20-30		30 - 40		40 - 50		50 - 60		>60	
How did you hear about the course?									
Internet		Friend		Leaflet		Facebook		Twitter	Other
Do you have any pre-existing medical conditions?									
Do you have any dietary requirements?									
Please indicate order of Active Sessions you would prefer (Please note these are small group sessions and you will get to do all of them, early bird preference) PLEASE NUMBER 1 - 3									
YOGA			MEDITATION			STRENGTH TRAINING			