YOGA & FITNESS INVOICE

[Instructor Name/Studio Name]
[Street Address]
[City, State, Zip]
[Email/Phone]

Invoice #: _____
Date: _____
Due Date: _____

Bill To:
[Client Name]
[Client Address/Email]

Description (Session/Class Type)	Date	Qty/Hrs	Rate	Amount
[e.g., Private Vinyasa Flow]	[Date]	[0]	$0.00	$0.00
[e.g., Group HIIT Session]	[Date]	[0]	$0.00	$0.00

Subtotal: $0.00
Tax/Fees: $0.00
Total Balance Due: $0.00

Payment Instructions:
Please make checks payable to [Name] or pay via [Venmo/PayPal/Zelle Info].
Thank you for your practice and commitment to wellness!