

RATE ESTIMATE

Pilates Instruction

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

CLIENT:

[Client Name]
[Client Address]
[Phone]

Estimate #: [0001]
Date: [MM/DD/YYYY]
Valid Until: [MM/DD/YYYY]

SESSION DESCRIPTION	QUANTITY	UNIT RATE	TOTAL
Private Pilates Session (60 Min)		\$	\$
Duet Session		\$	\$
Group Reformer Class		\$	\$
Apparatus/Equipment Fee		\$	\$
Subtotal: \$0.00			
Discount: (\$0.00)			
ESTIMATED TOTAL: \$0.00			

Notes & Terms:

This is an estimate for services based on current rates. Final billing may vary based on actual sessions attended. Cancellation policy requires 24-hour notice to avoid full session charges.