YOGA TRAINING

[Instructor Name]
[Business Address]
[Phone Number]
[Email Address]

INVOICE

Invoice #: [000]
Date: [Date]
Due Date: [Date]

Bill To:

[Client Name]
[Client Address]
[Client Email]

Training Schedule:

[Session Frequency]
[Time/Location Details]

Description	Quantity/Hours	Rate	Amount
Personal Yoga Session - [Style]	[0]	$0.00	$0.00
Private Group Session	[0]	$0.00	$0.00
Custom Wellness Plan	[0]	$0.00	$0.00

Subtotal: $0.00

Tax: $0.00

Total Amount Due: $0.00

Payment Instructions:

[Bank Transfer Details / Venmo / PayPal Info]

Namaste. Thank you for choosing personalized yoga training.

Notes: [Cancellation policy or next session reminder]