Mindfulness Yoga

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

INVOICE

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

Bill To:

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

Description	Date	Duration	Rate	Amount
Private Yoga Session	[Date]	[60 Min]	$0.00	$0.00
Mindfulness Meditation Coaching	[Date]	[30 Min]	$0.00	$0.00
Personalized Sequence Plan	-	-	$0.00	$0.00

Subtotal: $0.00
Tax: $0.00
Total Amount Due: $0.00

Payment Methods: [Venmo / PayPal / Bank Transfer]

Thank you for practicing with presence.