My Testimonial/Recommendation

By writing about your experience in our clinic and signing below you will potentially help MANY other people to benefit from Physical Therapy, Therapeutic Yoga, and Yoga.

This form is a good way to describe *in your own words* what your experiences have been and how YOU have /are benefiting from physical therapy. You can write whatever you like, examples of things to include are:

- How you felt at the beginning, when we started
- How you feel now
- The progress and changes have you experienced

I consent to the use of this information so that others can understand how they too might benefit from Barefoot Physical Therapy and Yoga.

Patient's Signature:	 Date:
Patient's Name:	

(Please print your name as you would like it to appear below your testimonial)

*bring this with you to your next visit, THANK YOU for your support and in helping others choose Barefoot Physical Therapy and Yoga for their needs as well.