



FOR OFFICE USE ONLY:

Entered by: _____

Date: _____

*First Name: _____

*Last Name: _____

*Birthday: _____ / _____ / _____

Occupation: _____

*Email: _____

*Mobile Phone: _____

Gender: Female Male

Home Phone: _____

Referral Information

Work Phone: _____

Referred By: _____

*Email/SMS:

How did you hear about us?

Receive emails: Y N

Receive SMS: Y N

***Emergency Contact Information**

Name: _____

Relationship: _____

Phone: _____

Address Information

Street 1: _____

Street 2: _____

City: _____ State: _____ Postal Code: _____

Place a check mark next to any of the following that apply:

- Frequent Headaches Arthritis Varicose Veins Osteoporosis
- Blood Clots/Phlebitis Cancer Allergies Scoliosis
- Surgeries Diabetes Inflammation/ Swelling
- Pregnant (Due Date____) High Blood Pressure Any Contagious Disease/Illness
- Fibromyalgia/ Chronic Fatigue Any Skin Rash or condition
- Cardiac or Circulatory Problems Major Injuries Chronic/Neck Pain

Other: _____

Please read the following and sign where indicated.

I understand that the massage/bodywork I receive is provided for the basic purpose of relaxation and relief of muscular tension. There are certain medical conditions in which receiving a massage may not be appropriate. In those cases a referral from a physician may be required prior to services being provided. Massage/Bodywork is not a substitute for medical received by a medical specialist. If I experience any pain or discomfort during the session, I will immediately inform the therapist so that the pressure/strokes may be adjusted. In addition, if I am uncomfortable for any reason, I may ask the session be stopped immediately.

Draping will always be used during massage/bodywork sessions. No breast massage shall be done without written consent of the client and therapist. Any illicit or sexually suggestive remarks or advances made by me (the client) will result in immediate termination of the session.

Client Signature: _____ Date: ____/____/____

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Therapist Signature: _____ Date: ____/____/____

Suggestions for client: _____

Notes to front office: _____

