



SOL Healing Massage & Reflexology



Name: _____ Date of Birth: _____

Email: _____ Phone: _____

Occupation: _____ Referred by: _____

What pressure do you prefer?

- Light
- Medium
- Deep

Do you have any allergies or sensitivities? If yes, please explain:

- Yes
- No

Have you had any recent injuries or surgeries? If yes, please explain:

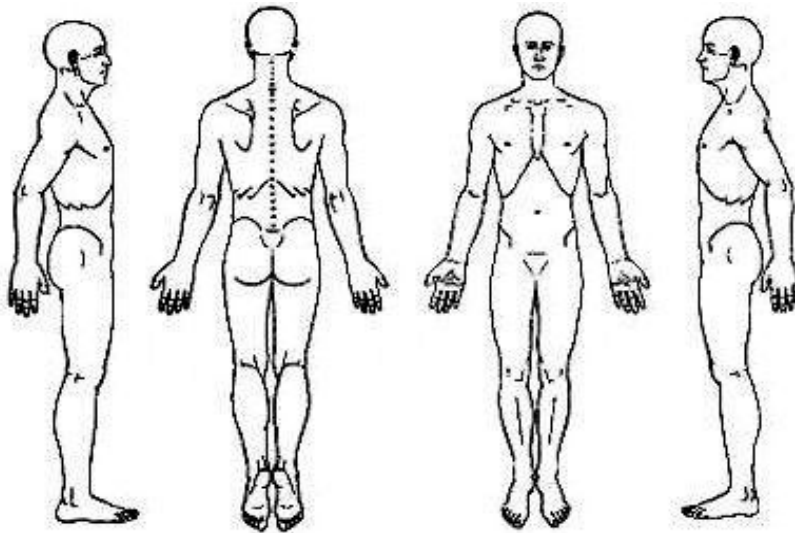
- Yes
- No

Are you pregnant?

- Yes
- No

Are there any areas (feet, face, abdomen, etc.) you do not want massaged?

Please **circle or note any areas that need extra attention & **place an X** on areas to be avoided**



By signing below, you agree to the following:

- I give my permission to receive massage therapy
- I understand that therapeutic massage is not a substitute for traditional medical treatment or medications
- I have clearance from my physician to receive massage therapy
- I understand the importance of informing my massage therapist of all medical conditions I may have and any medications I am taking.
- I agree to keep the practitioner updated as to any changes in my medical profile and understand that there shall be no liability on the practitioner's part should I fail to do so
- I understand the risks associated with massage therapy and I therefore release the massage therapist from all liability concerning injuries that may occur during the massage session
- I understand that it is my responsibility to inform my massage therapist of any discomfort I may feel during the massage session so she may adjust accordingly
- I understand that I or the massage therapist may terminate the session at any time

Cancellation Policy:

I respectfully ask that you provide me with a 24 hour notice of any schedule changes. Late cancellation not due to emergency or illness will result in being charged for the session.

Late Arrival Policy:

Arriving after your appointment time may result in loss of time from your massage so that your session ends at the scheduled time. Full service fees will be charged even when sessions are shortened due to late arrival.

Inappropriate Behavior Policy:

Massage therapy is for relaxation and therapeutic purposes only. There is absolutely no sexual component to massage whatsoever and any insinuation or gesture otherwise will result in immediate termination of the session. You will be charged the full service fee regardless of the length of your session.

Do you have any special needs, questions or concerns?

By Signing below you certify that you have read this agreement and that you understand and agree to the terms and conditions mentioned above.

Signature: _____

Date: _____