**Precautionary Coronavirus Liability Release Form**

Due to the 2019-20201 outbreak of the novel Coronavirus, COVID-19, we are taking extra precautions with the intake of each client, Covid-19 health history review, as well as sanitation and disinfecting practices. Please complete the following and sign below. Symptoms of COVID-19 include:

* Fever /High Temperature
* Unusual Fatigue
* Dry cough
* Difficulty Breathing
* Unexplained Body Aches or Pain
* Sore Throat
* Recent loss of sense of smell or taste
* Unexplained sore on soles of feet
* Non-Allergy Runny Nose

Client Name: I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ agree to the following:

* I understand the above symptoms and affirm that I, as well as all household members, do not currently have, nor have experienced the symptoms listed above within the last 14 days.
* I affirm that I, as well as all household members, have not been diagnosed with COVID- 19 within the last 30 days.
* I affirm that I, as well as all household members, have not knowingly been exposed to anyone diagnosed with COVID-19 within the last 30 days.
* I affirm that I, as well as all household members, have not travelled outside of the country, or to any city outside of our own that is or has been considered a “hot spot” for COVID-19 infections within the last 30 days.
* I will wait 14 days before attending a therapy appointment after traveling outside of the U.K
* I will notify my therapist should I show signs of COVID-19 post therapy at any time.
* I understand that this business and my massage therapist cannot be held liable for any exposure to the virus or any other contagion caused by misinformation on this form or the health history provided by each client.
* I have used the track& trace app or left my contact details

By signing below, I agree to each above statement and release the massage therapist Toni Creevy and her treatment rooms from any and all liability for the unintentional exposure or harm due to COVID-19. Your massage therapist agree that they abide by these same standards and affirm the same.

Your therapists affirm that they have improved and expanded their sanitation protocols to more thoroughly fight the spread of COVID-19 and other communicable conditions. For Each Client we will use where required

* Disposable Sheet
* Disposable Pillow Case
* Disposable Head Rest Covers
* Clean Towels
* Plastic container to store clients garments
* Hand Sanitiser
* Mask
* Plastic Apron
* Digital Non-Contact Thermometer - Client & Therapist

1. The therapist will allow plenty of time between each client to sanitise, disinfect the Treatment Room, Equipment, Rest Room Facility & waiting area if used.
2. Antibacterial hand wash will be made available to the client
3. All Disposable therapy items will be disposed of immediately after each session is completed within a refuse bag

Client Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_

As our client, if you have a scheduled appointment and are not feeling well, we understand and request for you to please contact us as early as possible to reschedule.  To further support this, we have temporarily suspended our cancellation policy for all appointments and there will be no penalties for cancellation.

We continue to monitor this situation closely and will provide updates as they become available to best protect our team and clients