

Massage

Have you had a professional massage before? **YES** **NO**

Previous experience with massage: _____

How do you prefer massage pressure: **LIGHT** **MEDIUM** **FIRM**

What is your music preference for the massage session: **CHRISTIAN HYMNS** **CLASSICAL** **NO MUSIC**

What is your preference of essential oil to be diffused into the air:
EUCALYPTUS **LAVENDER** **PEPPERMINT** **CITRUS** **SPICE BLEND** **ANY SCENT** **NO SCENT**

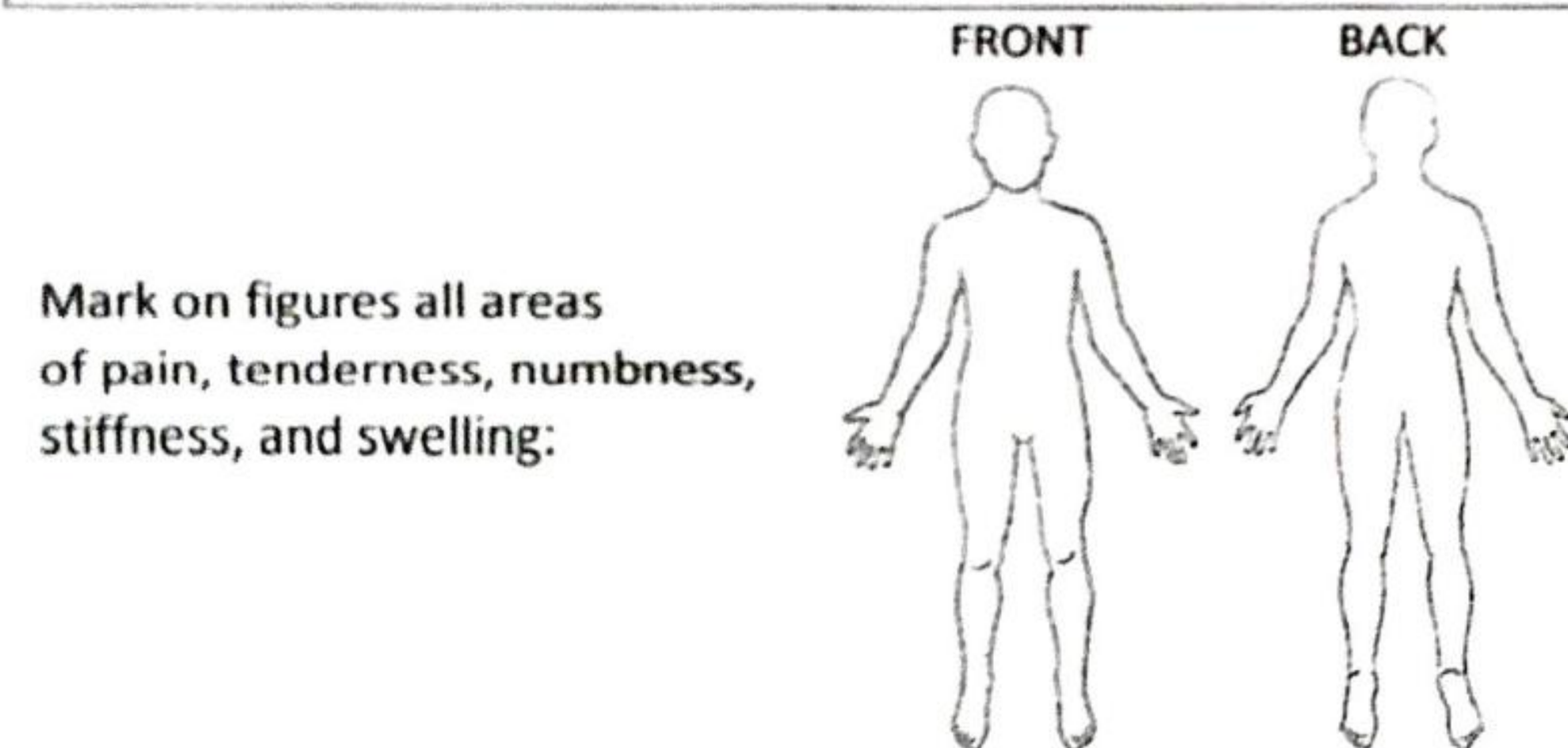
Do you give permission for your therapist to pray with you at the start of each massage session? **YES** **NO**

Do you have any allergies to coconut oil or essential oils? _____

How did you find out about Servant Hands? _____

Please check below any areas of your body you **DO NOT** want massaged: (genitals and breasts always excluded)

___ Abdomen/Stomach ___ Chest ___ Buttocks ___ Arms ___ Face ___ Head
___ Legs ___ Feet ___ Other: _____



Cancellation Policy: By signing this intake form, I agree to cancel or reschedule an appointment 24 hours before my appointment time to avoid being charged the full session price (emergencies excluded). Also, I will reschedule if I have any signs of sickness. If I arrive late to my appointment, I understand that the session will still end at the designated time slot and full payment will be due.

Consent for Care: I have completed this form to the best of my knowledge. I understand that there is no implied or stated guarantee of success or effectiveness of individual techniques or series of appointments. I understand that massage therapy is designed to be a health aid and is in no way to take the place of medical care when it is indicated. Clients under the age of 18 must have a parent or legal guardian's signature for authorization of the massage session and must have them present in the room for the duration of the session. I agree to inform my massage therapist immediately of any change in the conditions stated above. I, to the best of my knowledge, have no physical conditions that would contraindicate massage therapy. I agree to hold Servant Hands and its therapist harmless from any claims resulting from massage therapy treatment received here.

Signature _____ Date _____