

Massage Policies

What the massage therapist can expect:

- Payment is expected at the time services are rendered.
- Cash, credit cards, or checks are accepted.
- Clients will be charged a cancellation fee for appointments cancelled with less than 24 hours notice.
- Massage sessions are for improving health. The therapist will discontinue the massage if the client speaks with sexually inappropriate language or pursues inappropriate touching.

What the client can expect:

- All records will be kept strictly confidential.
- Various methods of Swedish Massage techniques will be used during the session, combined with additional techniques such as: Myofascial Release Techniques, Reflexology, Assisted Stretching, Neuromuscular Re-Education Techniques, Trigger Point Therapy and Kinesiology.
- During the massage session, the client will be draped, modestly exposing only the area to be massaged at that time. The genitals are never exposed or massaged.
- Parts of the body to be massaged during the session are as follows. Please **mark through** any areas you **do not wish to have massaged**. HEAD, NECK, SHOULDERS, UPPER BACK, LOWER BACK, ARMS, HANDS, LEGS, FEET, and GLUTES.
- Neither the abdomen nor breasts (female clients) will be massaged unless agreed upon by both therapist and client.
- The therapist has the right to refuse services to clients if client history reveals contraindications that could be harmful to the therapist or client.
- The therapist will be sensitive to the client's comfort dealing with body temperature, areas of pain, privacy, skin allergies, and massage preferences. **Please talk to your therapist about these preferences**. If client becomes uncomfortable for any reason, the client may ask to cease the massage and the therapist will comply.

If the client's reason for seeking massage changes at any time and any of the information above changes, this form must reflect same or be replaced with a new one.

I, _____ understand that massage therapy is intended to enhance relaxation, reduce pain caused by muscle tension, increase range of motion, improve circulation, and offer a positive experience of touch. I understand that massage therapy is not a substitute for medical treatment or medication, and that it is recommended that I concurrently work with my Primary Caregiver for any condition I may have. I am aware that the massage therapist does not diagnose illness or disease, does not prescribe medications, and that spinal adjustments are not part of massage therapy. I have informed the massage therapist of all my known physical conditions, medical conditions, and medications and I will keep the therapist updated upon any changes. I understand the above policies and agree to abide by them.

Client Signature

Date

Therapist Signature

Date