

Therapeutic Massage Client Intake Form



Personal Information

Mr. Ms. Mrs Name: _____ Phone: _____
Address: _____ Suburb: _____
City: _____ Postcode: _____ Date of Birth: ____/____/____
Email: _____@_____ Occupation: _____

Massage Information

- How did you hear about me?

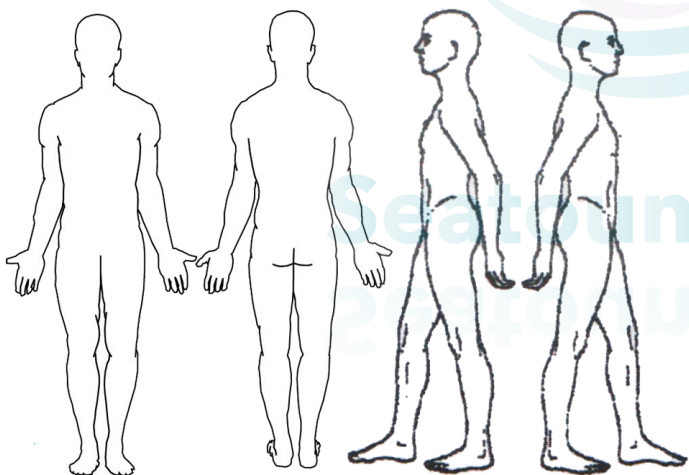
- Do you have any difficulty lying on your front, back or side? yes no
- How often do you receive massage therapy?

- Do you have sensitive skin? yes no
- Do you exercise regularly? yes no
If so, what types?

- Circle any specific areas you would like the massage therapist to concentrate on during the session:

Medical History

- Do you suffer from chronic or persistent pain discomfort? yes no
- If so, for how long? _____
- Do you know what caused it or when then symptoms seem to get worse or better?
- Are you currently under medical care? yes no
- Are you pregnant: yes no
- Please indicate any conditions that you have had or currently have:
 - Headaches, migraines
 - Allergies, sensitivity
 - Arthritis, tendonitis
 - Cancer, tumours
 - Stroke
 - Open sores or wounds
 - Contagious skin/nail condition
 - Heart/circulation problems
 - Joint replacement/ surgery
 - High / low blood pressure
 - Carpal tunnel syndrome
 - Decreased feeling / sensation
 - Epilepsy
 - Varicose veins
 - Blood clots
 - Neck / back pain
 - Diabetes
 - Paralysis
 - Fibromyalgia
 - Numbness
 - Sprains, strains
 - Recent accident or injury
 - Easy bruising
 - Phlebitis
 - Current fever/gland swelling



Other conditions:

By signing below, I acknowledge that I have read and agreed to the terms and conditions outlined on the reverse side of this document. I confirm that I am participating in massage therapy at my own discretion and understand that I am solely responsible for my well-being during the session. I declare that I am an adult and do not have any medical conditions, such as heart disease or reliance on a pacemaker, that would pose a risk during a massage. I will disclose and continue to update the masseur about any health issues I may have. I acknowledge that Seatoun Massage (Martina Alemagna) cannot be held accountable for any complications that may arise during or after the treatment. I understand and accept that all massage sessions are strictly professional and non-sexual in nature. By signing this statement, I waive any right to pursue legal action or claim damages against Seatoun Massage (Martina Alemagna)

.....
Signature

.....
Date

.....
Signature of guardian/parent

Terms and Conditions

At Seatoun Massage, we prioritise a tranquil environment for healing, relaxation, and education on wellness. To ensure a positive experience for everyone, please adhere to our policies outlined below:

- **Appointment Duration and Provider:** All treatments will be administered by Martina Alemagna (MA) and will last for the specified duration purchased.
- **Cancellation Policy:** We require a minimum of 24 hours' notice for appointment cancellations. Failure to provide adequate notice may result in being charged the full amount for scheduled services.
- **Arrival Time:** For the first appointment, an additional 5-10 minutes may be needed to complete the Client Intake Form. For subsequent appointments, please arrive promptly. Late arrivals may result in a shortened session to accommodate the following appointments.
- **Draping:** We use draping during treatments where clothing removal is necessary for your comfort and dignity. Only the area being treated will be uncovered.
- **Medical Conditions:** Treatments will only proceed if deemed safe by MA. In some cases, a client may need permission from a GP or consultant before treatment can be provided.
- **Payments:** We accept cash and bank transfers within 3 days of the massage appointment.
- **Young Clients:** Clients under 18 must be accompanied by an adult who consents to the treatment, co-signs the Client Intake Form, and remains present throughout the session.
- **Abusive/Sexual Behavior:** We maintain a zero-tolerance policy towards abusive or sexual behaviour. Clients displaying such behaviour will be asked to leave without a refund and will be refused future treatments. All treatments are strictly non-sexual, and any advances or comments of a sexual nature will result in immediate termination of services. Any instances of sexual or abusive behaviour will be reported to the NZ Police.

We appreciate your cooperation in upholding these policies to ensure a safe and respectful environment for all our clients.