

Reflexology Personal Information:

Name _____

Mobile Phone _____

Address _____

Email _____

Date of Birth _____

Referred by name, ph number

Emergency Contact name, Ph number _____

following information will be used to help plan safe and effective Reflexology sessions.
Please answer questions to the best of your knowledge.

1. How would you rate the current state of your health: Excellent Good Fair Poor

2. For women,are you pregnant? Yes/No If yes,What week/month?

3. Are you taking any medication? If so,what for?

4. List previous major illnesses, accidents, surgeries or broken bones:

5. Are you experiencing any problems with your feet? If so, explain:

6. Do you have high or low blood pressure?

7. Where is tension most evident in your body?

8. . Have you experienced reflexology before? If so, when?

9. Do you have any specific goals for our session?

Please take a moment to read the following information carefully.

I understand the Reflexology I receive is provided for the basic purpose of relaxation ad relief of tension and stress.If I feel pain or discomfort during the session,I will immediately notify my therapist,I affirm that I have told the therapist all of my medical conditions and answered all questions honestly.

A primary benefit of reflexology is relaxation. Relaxation through reflexology helps the body return to a state of balance, or homeostasis, and thus function more efficiently! Reflexology promotes balance, reduces stress, and improves circulation which improves the delivery of nutrients and oxygen to the cells of the body. I dont diagnose,treat specific illnesses,and dont prescribe or adjust medications. Reflexology is not a substitute for medical treatment, but may complement most types of treatment.

24 hours cancellation and No show policy.

Our time together is important to me. .We are happy to reschedule or cancel your appointment with 24 hours notice advance .After that time, a cancellation fee will be charged.

If you do not show up for your scheduled appointment,and you have not notified us at least 24 hours in advance,you will be required to pay the full cost of the treatment as booked.

Signature _____

Date

REFLEXOLOGY IS NOT A SUBSTITUTE FOR MEDICAL CARE. IF YOU ARE EXPERIENCING ANY SPECIFIC MEDICAL PROBLEM(S) AND HAVE NOT SEEN YOUR MEDICAL DOCTOR, I RECOMMEND THAT YOU DO SO TODAY.