

Blessed Hands Massage

THERAPY INC.



PERSONAL INFORMATION

Name: _____ Phone (day) _____ (evening) _____

Address: _____ City/State/Zip _____ DOB _____

Occupation _____ Employer _____

Email: _____ Primary Physician _____

Emergency Contact _____ Relationship _____ Phone _____

How did you hear about us? _____

MEDICAL INFORMATION

Is treatment required due to a Motor vehicle Accident/Work related injury? Yes No

If yes, please explain _____

Are you taking any medicine? _____

If yes, please list name and use: _____

Are you currently pregnant? Yes No

If yes, how far long? _____

Any high risk factors? _____

Do you suffer from chronic pain? Yes No

If yes, please explain _____

What makes it better? _____

What makes it worse? _____

Have you had any orthopedic injuries? Yes No

If yes, please list: _____

Please indicate any of the following that apply to you.

- Cancer
- Headache/Migranes
- Arthritis
- Diabetes
- Joint Replacements
- High/Low Blood Pressure
- Neuropathy

Explain any conditions you have marked above:

MESSAGE INFORMATION

Have you had a professional massage before? Yes No

What type of massage are you seeking?

Relaxation Therapeutic/Deep Tissue

Other _____

What pressure do you prefer?

Light Medium Deep

Do you have any allergies or sensitivities? Yes No

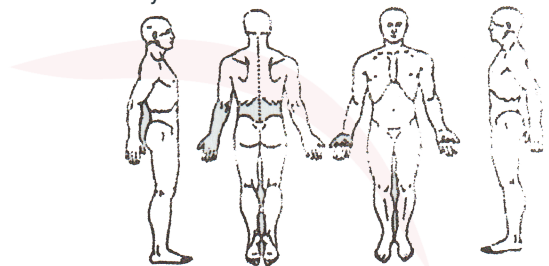
Please explain _____

Are there any areas (feet, face, abdomen, etc.) you do not want massaged? Yes No

Please explain _____

What are your goals for this treatment session?

Please circle any areas of discomfort




By signing below you agree to the following.
I have completed this form to the best of my ability and knowledge and agree to inform my therapist if any of the above information changes at any time.

Client Signature _____ Date _____

Therapist Signature _____ Date _____

**Blessed
Hands
Massage**
Therapy Inc.

 (587) 986 0987
(780) 720 0987



Unit 102, Building #1,
4245, 97 Street NW,
Whitemud business Park,
Edmonton, Alberta - T6E 5Y7



blessedhandsrmt@gmail.com



www.blessedhands.care