

Title:

Date:

You agree that you do not have any injuries or conditions that should prevent you from receiving massage therapy. You will be truthful about all medical conditions. You understand that inappropriate behavior will result in refusal of service with no refund. You will report any discomfort or pain to your therapist during your massage. You understand that massage therapy is not a substitute for medical care. You release your therapist and the associated business from all liability concerning any injury or damages that may occur or become exacerbated during or after your massage.

	Name	Signature	E-mail

Follow me on [instagram](#) for contests, tips and promotions: [touchedbysharron](#)
www.touchedbysharron.com


by Sharron
custom therapeutic massage