

Welcome to Rest Massage Therapy

I am 100% committed to your satisfaction.

Please read, initial, and sign each policy to ensure you have a GREAT experience with us.

Client Name: _____ Date: _____

CANCELLATIONS/RESCHEDULING:

If I am not able to make a scheduled appointment, I agree to cancel or reschedule the appointment at least 24 hours in advance. I agree to pay \$35 or 50% of the full session rate (whichever is greater) if I give less than 24 hours' notice. _____

I agree to pay the full session rate if I give 2 hours' notice or less, or if I miss an appointment without giving notice. _____

If within 24 hours of my session, I develop a contagious illness or have a sudden, unplanned health or personal emergency rendering me unable to make my appointment, I will inform Rest Massage Therapy right away, and if you are unable to fill my vacancy, I will pay the cancellation fee, or session fee (if less than 2 hours notice), unless an exception is granted, only at the discretion of Rest Massage Therapy. _____

I understand that I am still responsible for my appointment until I hear back from a staff member confirming they received my email or phone call requesting cancellation/rescheduling.

ARRIVING ON TIME/SESSION LENGTH:

I understand I must arrive 10-15 minutes early for my appointment in order to get the full session time I have scheduled. If I arrive on time, or late, I understand the therapist can only give me whatever time remains of my appointment, and that I will pay for the full length of the session that I booked. _____

I understand that in order for me to receive the best massage therapy possible, I know that I have to communicate ANYTHING and everything, including my needs, preferences, requests, or feedback, at any time before, during, or after my massage. I take it upon myself to communicate right away if there is anything distracting me or if I feel unwell or uncomfortable at any time during the session so that adjustments can be made. I understand that my therapist wants my HONEST feedback - positive or negative - and doesn't take offense to it. _____

I have read, understand, and agree to the above policies and information.

Signature: _____ Date: _____