

Aquarian Age Therapeutic Massage
1401 E. 15th St...Tulsa, OK...74120
918.587.5877

confidential client information

Name: _____ Date: _____

Address: _____ D.O.B. _____

Street, city, state: _____

Email: _____ Phone: _____

Occupation: _____

Have you ever received massage therapy? yes_____ no_____

What type (if known) _____

Reason for visit? physical_____ mental_____ emotional_____

Please explain: _____

Level of pressure desired: light_____ medium_____ deep_____

Are you currently seeing a healthcare professional? yes_____ no_____

Reason? _____

Please list allergies, injuries and surgeries: _____

Please list any skin conditions: _____

Chance of pregnancy? yes_____ no_____

Please list current medications: _____

Anything not listed of importance to your therapist? _____

Emergency contact: _____ Phone: _____

Parental consent (if under 18): _____

I understand I must be present for the session (initial): _____

Policies and Disclaimers

- 24 hour cancellation notice to avoid being charged full price.
- When steaming or using the sauna a towel is required...you may bring a swimsuit. No swimwear, footwear or robes are provided.
- Check in at least 15 minutes prior to appointment in order to steam or sauna.
- Steam room and sauna close down 15 minutes prior to spa closing.
- Deep tissue therapy may cause soreness or discomfort.
- DRINK LOTS OF WATER!

Couples Massage:

- Private steam for 30 minutes before and after massage.
- Swimwear, footwear and robes are not provided.

Referred by: _____

Preferred Therapist: _____

I UNDERSTAND THAT AQUARIAN AGE, SPIRITWORKS AND/OR PEACE OF MIND ARE NOT RESPONSIBLE FOR ANY ACCIDENTS OR INJURIES INCURRED THAT ARE NOT A DIRECT RESULT OF NEGLIGENCE OF SAID PARTIES.

Signature: _____ Date: _____

Intake initial: _____ Therapist initial: _____

