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Massage is very therapeutic. It is important to establish a baseline of medical information that will be used to protect you from complications while providing you with the benefits of massage.

BODY THERAPY INTAKE FORM

Name _____ Date of Birth _____

Address _____

Phone _____ Emergency contact _____

Occupation _____

Whom may I thank for referring you? _____

Have you had a professional massage? _____

What other types of treatment do you use for pain? _____

What can I help you with today? _____

1. Do you have allergies or reactions to any lotions, oils or topical products? _____
2. Do you have an objection to the use of therapeutic peppermint? _____
3. Are you being treated for anything contagious or infectious? _____

What results are you anticipating from this massage treatment? Please circle:

Increased mobility, tension release, energy boost, detoxing, stress relief, improved sleep?

Before body work commences, it is important to assess your current health care status:

Stage of Pregnancy? _____

Describe any drug use? To treat what? _____

Taking supplements for what purpose? _____

Acute or Chronic pain _____

Spinal issues _____ *Arthritis location* _____

Your comfort is my purpose. Please share any preferences you might have, at this time.