

BALANCED MASSAGE RESCHEDULING & PAYMENT POLICY

If you must reschedule an appointment, please give 24 hours notice. If less than 24 hours notice is given you will be responsible for paying 50% of the treatment's cost. For a no-show with no phone call the full massage price will be charged. Exceptions may be made in cases of illness or emergency, at our discretion. Late arrivals of 5 minutes or more will be deducted from the length of the treatment but charged at full price. By signing this form you acknowledge that you have given us permission to securely store your credit card information and charge it within a day if you fail to give us 24 hours notice of changes or cancellations. *Please note that we cannot bill insurance for a massage you didn't receive, but our cancellation policy still applies and you will be responsible for any missed appointments costs as detailed above.*

Full payment is due at the time of appointment, unless you have pre-arranged to have your insurance billed. Credit and debit cards, personal checks, or cash are gladly accepted. There will be a \$25 charge on all returned checks.

MASSAGE THERAPY INFORMED CONSENT

All massage treatments, information, credit cards on file and records will be kept confidential and securely stored for use only by associates of Balanced Massage. Written consent must be obtained prior to any disclosure of information with a third party.

I understand that the massage therapy provided at Balanced Massage is for the purposes of relaxation, pain relief, stress reduction, relief from muscle tension and soreness, increasing range of motion and circulation, and increasing general well-being. Your massage therapist may offer you cupping or gua sha as a part of your treatment, which can cause a localized discoloration of the skin due to increased circulation. You may decline consent if you are not interested in any modality or it's effects. I understand that massage therapists do not diagnose illness or disease and do not prescribe medical treatment or pharmaceuticals, nor are spinal manipulations part of massage therapy.

I understand that massage therapy is not a substitute for medical care and it is recommended that I work with my primary caregiver for any conditions I may have.

I have stated all my known physical conditions and medications, and I will keep the massage therapist updated on any changes. I understand that there shall be no liability on the practitioner's part due to adverse reactions occurring from my neglecting to relay any pertinent health information.

Draping will be used by the massage therapist to expose only those parts of your body requiring treatment and to maintain modesty. Please let your therapist know if you would prefer not to undress for your session. If at any time during your treatment you feel uncomfortable for any reason please let your therapist know so they may adjust pressure, technique or provide other modifications as necessary. If you have any questions or concerns after your treatment please feel free to call us.

We have a zero tolerance policy for harassment of any kind, including but not limited to: sexual solicitation, suggestive innuendo or inappropriate touch. Such behavior will result in immediate termination of your session and you will be charged in full. The therapists at Balanced Massage reserve the right to discontinue a session or refuse to treat any client or part of their body with just and reasonable cause.

Please make a note of these policies and plan accordingly.

I have read and understand this form and by signing I am consenting to treatment and full knowledge of the policies at Balanced Massage.

Signature _____

Date _____