Intended Health Benefits Acknowledgment Form

Tranquil Moments Massage Therapy

Our goal is to support health, relaxation, and well-being through professional massage therapy. While massage offers many potential benefits, individual results will vary.

Intended Health Benefits

Massage therapy may contribute to:

✓ Reduced muscle tension and physical discomfort
✓ Improved circulation and flexibility
✓ Enhanced relaxation and stress management
✓ Support for improved sleep quality
✓ Temporary relief from pain or stiffness
✓ General support for physical and mental well-being

Important Acknowledgments

By signing this form, I acknowledge the following:

✓ Massage therapy is not a substitute for medical treatment or diagnosis.
✓ The benefits listed are not guaranteed; every individual responds differently.
✓ I will notify the therapist of any discomfort, concerns, or changes in health.
✓ I have disclosed relevant medical history, medications, or recent injuries that may affect the session.
✓ If I experience any adverse effects following treatment, I will seek appropriate medical advice.

Section A — Individual Clients

Client Full Name: _____
Signature: _____
Date: _____

Section B — Minor Clients

(Complete if client is under 18)

Minor's Full Name: _____
Age: _____

I am the parent or legal guardian of the minor listed above and hereby give my consent for the minor to receive massage therapy services. I acknowledge the intended benefits and limitations outlined in this form.

Parent/Guardian Printed Name: _____
Parent/Guardian Signature: _____
Date: _____

Section C — Corporate Participants

(For employees or event participants receiving a massage through corporate wellness programs)

Company Name: _____
Participant Full Name: _____
Signature: _____
Date: _____