

2024/7/17 Treen Hargrave

Feel Better Remedial Massage

Personal information

First name Debra Last name Hargrave
Mobile number 0447066769 Email foxyash78@hotmail.com
Date of birth 16/06/1978
Address 55/30 Taylor place Mackenzie
Postcode 4156 Occupation Customer Care

Emergency contact

First name Jaidyn English Last name English
Mobile number 0487088159 Relationship Daughter

Health History

If you have a history of any of the following conditions, please check below.

- ☐ Heart Conditions ☐ Diabetes ☐ Asthma ☐ Headaches/Migraines ☐ Dizziness
☐ Pregnant ☐ High Blood Pressure ☒ Allergies ☐ Cancer ☐ Joint Replacement
☐ Loss of Balance ☐ Numbness ☐ Recent Accident/Injury ☐ Shingles
☐ Sleep Disorders ☐ Blood Clots ☐ Depression/Anxiety ☐ Infectious Conditions
☐ Kidney Conditions ☐ Neck/Spinal Injury ☐ Skin Disorders ☐ Varicose Veins

Health History Details

If you checked to any of the above questions, please provide further information here.

Surgeries Wisdom teeth. major dental

Current complaint

What is the reason for your visit? TMJ + lack neck movement. Shock
When did the problem begin? 10-12 years

Have you consulted any other health professionals about this problem? If so, please provide details.

Acupuncture, Chiro, OT, muscular skellis

Treatment consent

I have to the best of my knowledge, provided all relevant information about my health and medical history and I give my full consent to treatment. I intend this consent to apply to all future treatments and I understand that I must update my service provider with any changes that may occur in my medical history. I understand that a 50% cancellation fee may apply if I do not provide at least 24 hours notice.

☒ I consent to treatment

☒ I consent to receiving SMS and/or email for booking confirmation

Full Name Petina Haygrave

Signature [Signature]

Date 17/07/2024

If you are under the age of 18, your parent/guardian must also sign and date your new client form.

☐ Yes, I'm the parent/guardian.

Full Name _____

Signature _____

Date _____