

## Feel Better Remedial Massage

### Personal information

First name Caitlin Last name Lavelle  
Mobile number 0499784601 Email caitlin.lavelle@hotmail.com  
Date of birth 23/01/1991  
Address 53 Kamala Street Mansfield QLD 4122  
Postcode 4122 Occupation Administrator

### Emergency contact

First name Kaye Last name Lavelle  
Mobile number 0400171321 Relationship Mother

### 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 \_\_\_\_\_

### Current complaint

What is the reason for your visit? sore neck/tense in back

When did the problem begin? had for couple of years

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

Been to chiro/physio - stress/seating/sleeping related

**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 Carlin Lavelle

Signature  Date 22/04/2025

**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 \_\_\_\_\_