

Feel Better Remedial Massage

Personal information

First name Sharmin Last name Sunil
Mobile number 0469 836 573 Email sharminsunil@yahoo.co.uk
Date of birth 08/11/1998
Address 68 Henson Road Salisbury
Postcode 4107 Occupation Admin

Emergency contact

First name Avin Last name Ronan
Mobile number 0468 419 992 Relationship Partner

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.

Torn rectus femoris muscle

Surgeries _____

Current complaint

What is the reason for your visit? Shoulder/neck tightness

When did the problem begin? 1 year ago

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

No

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 Shamin Sunil

Signature shamin Date 29/08/2025

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 _____