



Independent Practitioner: Angela Tyree LMT,
TN Lic# 13888
Office Location: 1907 N. Roan St, Ste 202
Johnson City, TN 37601
angela@meritmassagecare.com
www.meritmassagecare.com
423-880-5496

Policy Notification

I appreciate that you've chosen me for your massage therapy needs. To provide the best service possible to my clients I have implemented the following policies.

Cancellation Policy

I respectfully ask that you provide at least 24-hour notice of any schedule change or cancellation. Please understand that when you cancel or miss your appointment without providing 24-hour notice I am often unable to fill that appointment time. This is an inconvenience to me as a therapist and means other clients miss the chance to receive the service they need. I reserve the right to charge \$25 for last-minute cancellations and no call no shows. If charged, the \$25 must be paid prior to your next appointment.

Late cancellation due to emergency, illness, or inclement weather will generally not result in any missed session charges, but this is determined on a case-by-case basis.

Late Arrival Policy

I understand that issues can arise that may cause you to be late for your appointment. However, I ask that you call if this ever occurs so I can do my best to accommodate you. Appointment times are reserved for each client, so oftentimes I cannot exceed that reserved time without making the next client late. For this reason, arriving after your appointment time may result in loss of time from your massage so that your session ends at the scheduled time. Full-service fees will be charged even when sessions are shortened due to your late arrival. In return, I will do my best to be on time, and if I am unable to do so, I will add time to your session to make up for my late arrival or adjust the service charge accordingly.

Inappropriate Behavior Policy

Massage therapy is for relaxation and therapeutic purposes only. There is absolutely no sexual component to massage whatsoever. Any insinuation, joke, gesture, conversation, or request otherwise will result in immediate termination of your session and refusal of all services in the future. You will pay the full service fee regardless of the length of your session. Treat me with respect and dignity and you will be treated the same in return.

By signing below, you agree to abide by the above policies.

Client Signature:

Date:



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Intake Form

Name:	Phone:	DOB:
Address:		How did you hear about me? (required)
City/State		
Email:		
Emergency Contact Name/Phone #:		
<p>Please list medications for the following: (If you carry around a list, you can just make a copy for me):</p> <p>For Heart or Blood Pressure:</p> <p>For Blood clots:</p> <p>For Cancer:</p> <p>For Pain:</p>		
<p>Please list orthopedic injuries, concerns, etc: (Rotator cuff, hip, ankles, knees, fusions, etc)</p> <p>Do you have any metal/screws in your body?</p>		
<p>Please indicate if you regularly receive any of the following and for what reason?</p> <p>Physical Therapy</p> <p>Occupational Therapy</p> <p>Chiropractic Care</p>		



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Please circle any of the following that apply to you:

Cancer	Headaches	Arthritis	Diabetes	Neuropathy	High or Low Blood Pressure
Fibromyalgia	Stroke	Heart Attack	Blood Clots	Kidney Dysfunction	Nut Allergies
Sciatica Pain	Joint Replacement (knee, hip, shoulder)	Anxiety	Severe Depression		

Please tell me what you hope to gain from massage therapy?
(*stress relief, chronic pain mitigation, anxiety relief, better sleep, etc.*)



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General Liability Release Form

By signing below, you agree to the following:

1. I give my permission to receive massage therapy.
2. I understand that therapeutic massage is not a substitute for traditional medical treatment or medications.
3. I understand that the massage therapist does not diagnose illness or injuries or prescribe medications.
4. I understand the risks associated with massage therapy include, but are not limited to: superficial bruising, short-term muscle soreness, exacerbation of undiscovered injury.
5. I understand the importance of informing my massage therapist of all medical conditions I have and medications I am taking. I understand that there may be additional risks based on my physical condition.
6. I understand that it is my responsibility to inform my massage therapist of any discomfort I may feel during the session so that they may adjust accordingly.
7. I understand that I may terminate the session at any time.
8. I therefore release the individual massage therapist from all liability concerning any injuries that may occur during the massage session.

Client Signature:

Date:



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Things to Know...

1. I don't accept tips, please don't offer. I consider massage therapy to be healthcare. You don't tip your nurse or doctor. I have priced my services to adequately cover my needs.
2. If you don't like getting undressed for a session, staying clothed is totally an option, just let me know.
3. If you'd like a silent session, please just let me know.
4. Please, please, please...TELL ME if I'm hurting you! I need to know what spots on your body are tender so I know how to best treat you. If you've scheduled your appointment with me expecting to be steam rolled, you have come to the wrong therapist!
5. If your face rest position is uncomfortable or you are too cold or too hot, PLEASE LET ME KNOW! Massage therapy is most effective when the person can stay completely comfortable and relaxed. Please don't think you are being an imposition by asking! I very much want you to be comfortable on my table.
6. If you are having trouble lying face down because of breasts or abdomen, LET ME KNOW! I can simply place towels in strategic spots to make you more comfortable.
7. Each session longer than 30 minutes generally includes a full body massage. This includes scalp, face, ears, feet, and glutes (*the sides of your rear end*)! If there are areas that you'd prefer not be touched, please LET ME KNOW!
8. If you are happy with the service once your session is over, please be so generous as to leave a review on Google for **Angela Tyree LMT**. Placing in the search engine rankings is HARD and every review, even if it's just the stars, is so helpful.
9. I do sell gift cards for 60 minute sessions. Want to buy some? Just ask!
10. I give 20% off each session to clients who make WEEKLY standing appointments. (*This offer applies to HomeTrust office visits only, not for mobile clients!*)