



ReCenter Massage and Bodywork
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Philadelphia, PA 19147
206.714.9751

COVID-19 Consent Agreement

Due to massage being a person to person contact service and COVID-19 continuing to present as potential health risk via person to person contact, the following is an addendum to ReCenter's consent form, acknowledging the risks and knowingly consenting to receive care. This agreement ensures better health and safety for all.

____ I have been outside Pennsylvania State within the last 14 days (circle one): Y N

If "yes", where: _____

____ I understand I must comply with all new procedural regulations including, but not limited to, wearing a mask during my session, washing my hands before the session, removing glove protection before entering the massage practice. (If requested, Meredith can provide you with new gloves at the end of the session).

____ I understand that my name and contact information might be shared with the state health department in the event that a client or practitioner at this facility tests positive for COVID-19. My contact details will only be shared in the event they are relevant based on suspected exposure date, and only for appropriate follow-up by the health department.

____ I understand that ReCenter Massage therapist, Meredith, reserves the right to cancel or reschedule my session if I show up to my session with cold or flu-like symptoms. I promise to disclose any known symptoms or possible exposures prior to my massage session. **This is very important not only for my health as a practitioner, but also protects the lives/health of my more vulnerable clients. Please be mindful and of course always call ahead if you have questions.

I _____(print name) understand that close contact with people increases the risk of infection from COVID-19. By signing this form, I acknowledge that I am aware of the risks involved and give consent to receive massage/bodywork from Meredith Holladay, LMT.

Signature

Date