

Body Therapy Treatment Consultation Form

Client Information

Name: _____

Competitor Number: _____

Date: _____

Health & Skin History - Circle any that apply

Allergies (medications, products, food, environmental): _____

Current Medications (topical or oral): _____

Skin Sensitivities or reactions: Fragrance Preservatives Heat

Other: _____

Recent sun exposure or tanning: None Mild Moderate Frequent

Past or current skin conditions: Acne Eczema Psoriasis Folliculitis

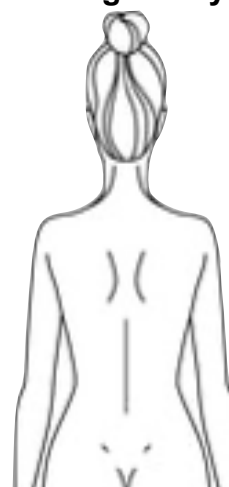
Keratosis Pilaris Other: _____

Skin Type Assessment

Skin Type	Description	Yes/No
Oily	Shiny appearance, enlarged pore, prone to breakouts	
Dry	Flaky, tight, rough texture, dull tone	
Normal	Balanced oil/moisture, smooth, few imperfections	
Combination	Oily in upper back/shoulders, dry in lower back	
Sensitive	Redness, irritation, itching or stinging	

Skin Condition Observations - If present, please indicate on the diagram by creating your own legend

Condition	Legend symbol
Acne/Congestion	
Blackheads/Whiteheads	
Pigmentation/Sun Damage	
Dehydration	
Redness/Inflammation	
Scarring	



Condition	Legend symbol
Ingrown Hairs	
Stretch Marks	

Based on your findings, please indicate below what ingredients you are choosing to create your custom exfoliant.

- ☐ Grape seed oil
☐ Coconut oil
☐ Epsom salt
☐ Dead Sea salt
☐ Brown sugar
☐ Raw sugar

Why have you chosen the above ingredients?

Hot Stone Massage Consent Form

Do you use any of the following?

- ☐ Retin-A
☐ Renova
☐ AHA
☐ Acne Medication

If YES was answered to any of the above, please elaborate.

Please indicated any of the following that may pertain to you and give a brief explanation.

- ☐ Allergies _____
☐ Arthritis _____
☐ Diabetes _____
☐ Joint Replacement(s) _____
☐ Low Blood Pressure _____
☐ High Blood Pressure _____
☐ Fibromyalgia _____

____ Numbness _____
____ Sprains/Strains _____

Any other contraindications? _____

By signing this form, I agree with the statements above and give my consent to proceed with the body therapy treatment.

Model Signature: _____