

Sign up sheet.

Chair massage

Name

Phone

Email

Preferred Time Slot

Duration of Massage

☐ 30 minutes

☐ 60 minutes

☐ 90 minutes

☐ 120 minutes

Allergies (if any)

Preferred Pressure

☐ Light

☐ Medium

☐ Deep

Name

Phone

Email

Preferred Time Slot

Duration of Massage

☐ 30 minutes

☐ 60 minutes

☐ 90 minutes

☐ 120 minutes

Allergies (if any)

Preferred Pressure

☐ Light

☐ Medium

☐ Deep

Name

Phone

Email

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