

I consent to receive massage, bodywork or esthetic services at Michelle's Massage Therapy and Holistic Spa and will not hold Michelle's Massage Therapy, Inc. or any of its staff liable if I contract COVID-19, the flu, or a cold within 14 days of my service. I understand it is my choice to receive services and the staff's choice to provide these services in a clean and sanitary space. I also have not had close contact with someone diagnosed with COVID-19, or have cold or flu-like symptoms within the last 14 days.

X _____ Date _____