1308 E. Garrison Blvd.
Gastonia, NC 28054
704-823-1577
info@hcwellnesscenterandspa.com
www.HCWellnessCenterAndSpa.com

HC Wellness Center & Spa

Achieving Health One Person At A Time.

Patient Information

Name:		DOB:
Cell Phone:	Cell Carrier:	Home Phone:
Street Address:		
City:	State:	ZIP Code:
Occupation:		Currently Under Physicians Care? ❑ N ❑ Y
Contact Email:		
Blood Type:	How did You Here About Us (if referred, by whom)?:	

Medical History

What Types of Exercises/Activities do You Actively Participate In?

What do You do for Relaxation?

Are You Currently Pregnant? ❑ No ❑ Yes | If Yes: How Many Weeks?

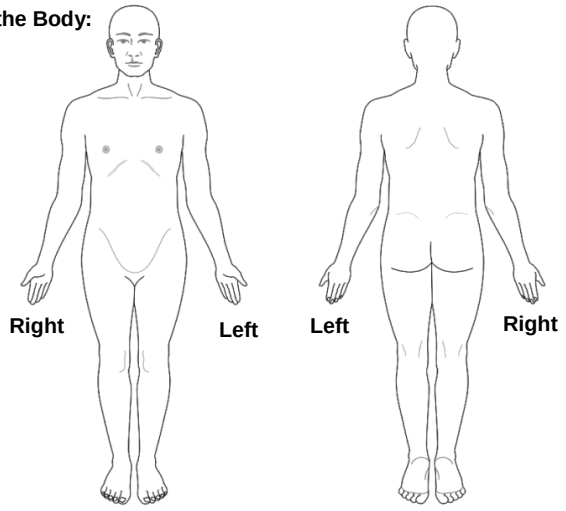
Check if you experience:					****Check if any of the following apply:***
❑ Neck/Spine Injury	❑ TMJ Syndrome	❑ Cold/Flu/Fever	❑ Heart Ailment	❑ Infectious Disease	❑ Pacemaker
❑ Cancer	❑ Carpal Tunnel	❑ Varicose Veins	❑ Fibromyalgia	❑ Breathing Disorders	❑ Implanted Device with Batteries
❑ Back Pain	❑ Sports injuries	❑ Work Stress	❑ PMS	❑ Arthritis	❑ Have a Transplanted Organ
❑ Sciatica/Leg Pain	❑ Joint Pain	❑ Home Stress	❑ Skin Disorders	❑ High Blood Pressure	❑ Breastfeeding or Pregnant
	❑ Grief/Depression	❑ Liver Ailment	❑ Diabetes	❑ Low Blood Pressure	
	❑ Osteoporosis	❑ Kidney Ailment	❑ Headaches	❑ Other Pain	

List any supplements and prescription medications used:

List any injuries, accidents, medical treatments or surgeries (and dates):

Reason for Today's Visit (MASSAGE THERAPY ONLY):

MASSAGE THERAPY ONLY: Indicate Areas of Pain/Concern on the Body:



APPOINTMENT POLICY & AGREEMENT *(Please Read Carefully)*:

- **A credit card is required to hold a scheduled appointment time.** You may change the form of payment during your appointment.
- **Cancellations/Missed Appointments:** In order to continue to offer extended hours and for the courteousness of both our clients and staff; a minimum of 24 hours notice is required to cancel any appointment. Missed Appointments and cancellations, made less than 24 hours, will be **CHARGED A CANCELLATION FEE OF UP TO 100%**. Pre-paid packages will have a session deducted from your package plan.
- **Late Policy:** If you are late for an appointment, the time will be deducted from your session, as we cannot extend the allotted appointment time. If you're more than 15 minutes late, you may need to reschedule your appointment. It's important to meet the needs of ALL of our clients by keeping waiting times to a minimum.

The above information is true and accurate to the best of my knowledge. I agree to update my therapist on any changes that occur with my health. I understand that our therapists do not diagnose disease, prescribe medications or manipulate bones. I further understand that these therapies are not a substitute for medical attention or examination. I understand that due to the nature of massage therapy, bruising is likely and may occur.

Name PRINTED:	**Name SIGNATURE:**	**Date:**