

Personal Reference Form

REGISTERED MASSAGE THERAPY

For the safety of our practitioners, we ask all new clients who book a home visit appointment, and who we haven't yet had the pleasure of meeting in person, to provide personal references. We appreciate your co-operation!

Acceptable personal references include:

- current or previous clients of Calm Massage Therapy & Wellness Studio Ltd.
- health practitioners whose professions are regulated
- representatives of companies with whom Calm Massage Therapy & Wellness Studio Ltd. has a relationship

Please provide us with the following information as soon as possible so we can reach out to your personal reference prior to your home visit appointment.

Full Name: _____

Phone Number: _____

Email Address: _____

Select One:

- Current or previous client of Calm Massage Therapy & Wellness Studio Ltd.
- Health practitioner - please specify their profession _____
- Representative of a company - please specify the company _____

If your personal reference would prefer to reach out and provide us with a direct referral prior to your home visit appointment, please ask them to do so as soon as possible by phone at 250.382.CALM (2256) or by email at calm@be-calm.ca.

Please note that if we do not **EITHER** receive this form **OR** hear from your personal reference **at least 48 hours prior to the start of your home visit appointment**, we may need to reschedule or cancel the appointment.

RMT USE ONLY

DATE: _____ RMT INITIALS: _____

Document your conversation with the new client's personal reference:
