**Rio Massage and Wellness**

 **Safe Health Practice Agreement**

**As the therapist,** I will be operating with a mask during each session. I have extreme cleaning and sanitizing measures in place to ensure we are as preventative as possible. We have an air ionizer to help purify the air in between each session, as well as allowing the space to air out for at least an hour between clients. There will also be several hand sanitizing stations around the office. I will also be limiting the number of clients I see each day to ensure thorough cleaning between each session. If I am exposed to the COVID-19 virus I will notify clients and also be tested to ensure the safety of continuing in practice.

**As the client,** I ask that you come equipped with a mask and be prepared for me to take your temperature at the door with an infrared thermometer. I will provide you with a disposable mask if you do not have one. I ask that you wash your hands upon arrival and also when leaving. If you are feeling unwell please reschedule your appointment. You will not be charged for last minute cancellations.

By completing the COVID-19 questionnaire you understand the risks that you, the client, and I, the therapist, are taking through exchanging bodywork at this time. I want to make very clear that it is up to you as an individual to assess your risks appropriately for yourself and for the community. Please call me if you have any questions or concerns.

By signing this agreement, you recognize that you are responsible for your health and risks at this time. Further you release Rio Massage and Wellness, Alisha Witcomb and Rose Adams, from all liability if you contract COVID-19 in the facility. Lastly, I will also sign this agreement per client to ensure that I am assessing my risks appropriately each session.

**Client Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Therapist Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_**