

Tarregower Remedial Massage

From: Squarespace <form-submission@squarespace.info>
Sent: Tuesday, 21 March 2023 10:49 AM
To: tarregowerrm@gmail.com
Subject: Form Submission - Client-History-form

Sent via form submission from [Tarregower Remedial Massage](#)

Name: David Honebone

Identify as: Male

Email: valleybee489@gmail.com

Contact phone number: 0428304066

Address: 18 happy valley rd, Castlemaine, Vic 3450 Australia

Date of Birth: 12/22/1974

Occupation: Beekeeper

What sports and/or activities do you do?: 0

Health Fund?: Bupa

Health fund Extras cover?: No

Emergency Contact name: Kristy Honebone

Emergency contact phone number: 0428258854

Do you have any limitations for treatment?: No

Details of limitations if previous answer is yes:

What are your expectations for treatment?: To correct me

Is there a possibility that you are pregnant: I am Male

Do you have varicose veins?: No

Do you have sunburn?: No

Have you had any recent surgery or do you have scar tissue?: No

Details if answer to previous question is yes.:

Do you have any inflamed or painful areas?: Yes

Details if answer to previous question is yes.: Lower back

High or Low Blood Pressure: Normal

Do you have a circulatory disorder?: No

Do you take supplements?: No

Details if answer to previous question is yes.:

Do you have arthritis?: No

Details if answer to previous question is yes.:

Do you have any allergies?: No

Details if previous answer is yes.:

Do you have diabetes?: No

Have you ever had blood clots or been diagnosed with DVT?: No

Have you had any fractures or dislocations: No

Details if previous answer is yes.:

Do you suffer from headaches or migraines?: No

Do you have cancer?: No

Details if previous answer is yes.:

Do you have any infectious conditions?: No

Are you taking any medications?: No

Details if previous answer is yes.:

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