

Termination of Session

Due to the inappropriate nature of either your language or actions, your practitioner has decided to terminate the current session. **Your immediate removal from the premises is requested.** You will receive an invoice by mail requesting full payment for services rendered.

Client's Name _____

Therapist's Name _____

Date _____ Time _____

Location of Massage _____

Description of Events _____

Were there any others present? If so, who? _____

Future appointments will no longer be accepted unless otherwise notified.

Conflict Resolution? _____

Date _____ Signature _____

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