

INITIAL CONSULTATION FORM

Name:	DOB:
Address:	Phone Number:
Occupation:	Email:
Relevant Medical History:	Current Medication:
Do you have Private Health with Extras? Y / N Fund Name:	Have you ever been diagnosed with a serious infectious disease? Y / N Please name:
Allergies/Reactions:	How did you hear about me?

Acupuncture involves the insertion of sterile needles into the body. This sometimes results in temporary light bleeding, bruising or swelling. In order to carry out the Acupuncture treatment, sometimes the removal of clothes is required. You will always be given privacy to undress, and towels to cover yourself, however you always have the right not to remove clothing if you choose.

24hrs notice is required to cancel or reschedule an appointment. By signing this agreement, I agree to comply with Belinda Tran's cancellation policy and that a 50% cancellation fee may be payable.

I have read and understood the above information.

Signed: _____ Date: _____