

Artful Art of Massage
17311 135th Ave NE, Suite A-850
Woodinville, WA 98072
425-415-1334

Acceptance: I hereby request acceptance by Lorri Enwall LMP and Artful Art of Massage, LLC as a patient for the initial purpose of disclosing my health history and thereby facilitating a physical examination to address the symptom(s) I have been experiencing, which led to my seeking massage therapy services.

Treatment Authorization: I hereby authorize Lorri Enwall LMP and Artful Art of Massage, LLC to administer treatment services as indicated by Lorri Enwall LMP and Artful Art of Massage, LLC

INSURANCE

Release of Confidential Information: I hereby authorize Artful Art of Massage to release my medical information to my insurance company as needed to process my claims. I understand that Artful Art of Massage bills my insurance company as a courtesy to me without charge. I understand that in the event my insurance company does not cover medical costs I am responsible for payment in full.

Liability of Patient: In consideration of my admission to treatment as a patient and the services to be rendered, I hereby individually obligate myself to pay my account in accordance with regular rates and terms. **Missed appointments without notice or cancellation made less than 12 hours will be billed \$25.00.**

I consent to the use or disclosure of my protected health information by Lorri Enwall, LMP, for the purpose of providing treatment to me, obtaining payment for my health care bills.

I understand treatment of me by Artful Art of Massage be made conditioned upon my consent as evidenced by my signature on this document.

General Relaxation

Payment at Time of Service

30min	\$35.00
60min	\$60.00
90min	\$90.00

Therapeutic Tension/Pain Relief

Payment at Time of Service

30min	\$45.00
60min	\$75.00
90min	\$120.00

Medical Treatment*

Reflects amount billed. Reimbursement rates vary depending on contracted amounts determined by insurance companies.

15min	\$30.00
30min	\$60.00
60min	\$120.00

Patient/Client _____ Date _____