



Massage Therapist Application

Thank you for your interest in Prasada and being part of our team. Please complete the following application and return to Stacy Hines at stacy@prasadawholebeing.com or mail to 129 Barley Court, Langhorne, PA 19047. All massage therapists are required to be licensed and have liability insurance. Please provide verification of your licensure, insurance policy, and résumé with this application. Visit us at www.prasadawholebeing.com for more information.

Name: _____ Date: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Work Phone: (____) _____ E-Mail: _____

Address: _____ Apt.#: _____

City: _____ State: _____ Zip: _____ Date of Birth: _____

Emergency Contact: _____ Phone: (____) _____ Relationship: _____

How did you hear about us? _____

Do have a car? _____ If not, what forms of transportation do you use? _____

Outline your training and list the licenses, certifications, etc. you hold. _____

What interests you about offering services in the corporate environment? _____

What do your clients typically say about your services? _____

What do you see as your role for clients in the corporate environment? _____

List any onsite massage experience _____

List the times and locations where you are currently offer services. _____

In addition to providing onsite massages, would you be interested in:

- Live Great Workshop Presentations: 45-60 minute wellness presentations (numerous topics)
- Health Fairs: talking with people about massage and Prasada offerings

Please indicate your available times that you would most love to have a Prasada client.

- | | | | | |
|--|---|--|--|--|
| <input type="checkbox"/> Mon am | <input type="checkbox"/> Tues am | <input type="checkbox"/> Wed am | <input type="checkbox"/> Thurs am | <input type="checkbox"/> Fri am |
| <input type="checkbox"/> Mon lunch | <input type="checkbox"/> Tues lunch | <input type="checkbox"/> Wed lunch | <input type="checkbox"/> Thurs lunch | <input type="checkbox"/> Fri lunch |
| <input type="checkbox"/> Mon afternoon | <input type="checkbox"/> Tues afternoon | <input type="checkbox"/> Wed afternoon | <input type="checkbox"/> Thurs afternoon | <input type="checkbox"/> Fri afternoon |
| <input type="checkbox"/> Mon early evening | <input type="checkbox"/> Tues early evening | <input type="checkbox"/> Wed early evening | <input type="checkbox"/> Thurs early evening | <input type="checkbox"/> Fri early evening |