

before the end of the month.

The Angel Healing Space includes: private room, massage table, stool, portable air filter system, portable room heater, clock, anti-bacterial wipes, and use of upstairs restroom.

Therapist / Bodyworker Responsibilities:

- Scheduling and timely payment to The Angel Healing
- Providing your own linens and blankets
- Set up and clean up of room (please wipe down areas touched)
- Liability Insurance

Terms of use: The shared space is only available to therapists / bodyworkers who have signed this agreement with The Angel Healing.

Liability Waiver: In consideration of the acceptance of this agreement, the second party, for themselves and or for anyone entitled or empowered to act on their behalf, including their heirs, executors and administrators hereby waive and release and forever discharge any and all rights, claims or liabilities for any or all damages or injuries against first party, The Angel Healing.

I, _____ request:

Hourly Rate User

Monthly Rate User for Sun / Mon / Tue / Wed / Thu / Fri / Sat of each month beginning the month of: _____ .

Name of Therapist: _____

Signature of Therapist: _____

Date: _____ Phone #: _____

Email: _____ Venmo _____

Address: _____

Signature of The Angel Healing: _____

((Please bring a copy of your LMT license (Massage Therapy), or other professional license (therapeutic or other) for our records.