



**BOOKING SHEET**

Date of booking:	Y	Y	Y	Y	/	M	M	/	D	D	Reference Number:		
Surname:													
First Names:													
Date of Birth:	Y	Y	Y	Y	/	M	M	/	D	D	Gender	M	F

<b>CONTACT DETAILS:</b>													
Telephone (W)											(H)		
(C)													
Physical Address:													
E-mail Address:											Price:		
Package:													

Have you been to <b>COUNTRY BLISS</b> previously?	Y	N	Do you wear <b>spectacles</b> and/or <b>contact lenses</b> ?	Y	N
How did you hear about us?					
Dietary requirements: <small>(Halaal/ Vegetarian, etc.)</small>					
Are you <b>pregnant/ lactating</b> ?					

<b>MEDICAL HISTORY:</b>					
Allergies (Specify below)	Y	N	Migrane / Headache	Y	N
Cancer	Y	N	Spinal Injury	Y	N
Diabetes	Y	N	Surgery (less than six months ago)	Y	N
Epilepsy	Y	N	Surgery (more than six months ago)	Y	N
Heart Disease	Y	N	Tension	Y	N
Hormone Imbalance	Y	N	Thrombosis	Y	N
Hypertension	Y	N	Thyroid disease	Y	N
Hysterectomy	Y	N	Varicose veins	Y	N

Pressure of massage preferred	<b>LIGHT</b>		<b>MEDIUM</b>		<b>HARD</b>	
Gown Size:	<b>SMALL</b>	<b>MEDIUM</b>	<b>LARGE</b>	<b>X-LARGE</b>	<b>XX-LARGE</b>	

- Kindly note that all information supplied is true and correct.
- Please sign below and fax back with proof of payment quoting your reference number.
- The payment and booking form must be received by COUNTRY BLISS within 24 hours to confirm your booking.
- Once received a booking confirmation number will be allocated to you to validate your booking.
- Clients are kindly requested to bring along their swim wear and tracksuit pants for winter months and extra set of underwear.

I, ..... (full name/(s) have read all the information supplied and hereby agree and accept.

Client's Signature: ..... Date: .....

<b>PAYMENT METHOD</b>			<b>BANKING DETAILS</b>		
1. Direct Bank Transfer (please fax deposit slip)			Bank: Standard Bank		
2. Internet Payment (please Fax / E-mail deposit slip)			Branch: Meyerton		
3. Credit Card Payment: Card Type: _____			Branch Code: 014537		
Card number: _____			Account No.: 421754427		
Expiry Date: _____			Account Name: Country Bliss		
CVV No.: _____			<input type="checkbox"/> <b>STRAIGHT</b> <input type="checkbox"/> <b>BUDGET</b>		