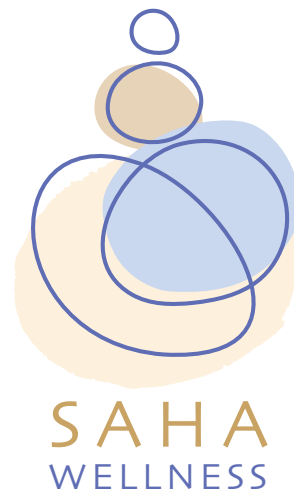


# WELCOME TO SAHA WELLNESS



NAME

ADDRESS

POSTCODE

PHONE NUMBER

EMAIL

SOCIAL MEDIA HANDLE

## PAYMENT OF £40

☐ BANK TRANSFER: Faine Sinclair, 40-41-26, 81379763

☐ PAYPAL: [fainegow@hotmail.com](mailto:fainegow@hotmail.com)  
if using paypal please uncheck buyer protection

## REQUIRED INFO

ALLERGIES

DIETARY REQUIREMENTS

INJURIES

CONSENT TO PHOTOGRAPHY ☐ YES ☐ NO

## AVOID Facial Gua Sha

☐ Botox/filler within last 6 weeks ☐ Uncontrolled blood pressure

☐ Head and neck injury ☐ Recent fever or illness

If participating in the group facial and own a Gua Sha tool please bring it with you

SPORTS MASSAGE ☐ YES ☐ NO

Please complete google form if having sports massage [CLICK HERE](#)

(<https://forms.gle/uQoVdpp9sGc24Nqq9>)

**return to [info@yogafaine.com](mailto:info@yogafaine.com)**

** [saha\\_yoga\\_wellness](#)**

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