



KIEVITS KROON

GAUTENG WINE ESTATE



GUEST INFORMATION AND INDEMNITY FORM

GUEST USING THERMEA FACILITIES ONLY, PLEASE FILL IN FIELDS MARKED WITH A *

PLEASE COMPLETE

*	DATE	
*	NAME AND SURNAME	
*	EMAIL ADDRESS	
*	CELLPHONE CONTACT NUMBER	
*	ALTERNATIVE CONTACT NUMBER	
*	POSTAL ADDRESS	
*	CODE	
*	DATE OF BIRTH	
*	PLEASE PROVIDE CONTACT DETAILS IN CASE OF AN EMERGENCY	
*	NAME AND SURNAME	
*	CELLPHONE CONTACT NUMBER	
*	ALTERNATIVE CONTACT NUMBER	
*	RELATIONSHIP	

PLEASE TICK

*	NON- RESIDENTIAL GUEST	
*	RESIDENTIAL GUEST	
*	ROOM NUMBER	

PLEASE COMPLETE AND TICK

*	WOULD YOU LIKE TO BE KEPT INFORMED ABOUT PROMOTIONS?	YES	NO
	WHERE DID YOU HEAR ABOUT KIEVITS KROON SPA?		
*	ARE YOU USING ANY CHRONIC MEDICATION?	YES	NO
*	IF YES, PLEASE SPECIFY:		
*	DO YOU HAVE ANY ALLERGIES?	YES	NO
	IF YES, PLEASE LIST:		
*	ARE YOU PREGNANT OR BREASTFEEDING?	YES	NO
*	DO YOU HAVE ANY OTHER MEDICAL CONDITIONS WE SHOULD KNOW ABOUT?	YES	NO
	IF YES, PLEASE LIST:		
*	TELL US ABOUT RECENT SURGERIES YOU HAVE HAD PLEASE:		
*	DO YOU HAVE ANY SKIN CONCERNS?	YES	NO
	IF YES, PLEASE DESCRIBE:		
	ANY SPECIFIC AREAS YOU WOULD LIKE TO FOCUS ON DURING THE TREATMENT?	YES	NO
	IF YES, PLEASE SPECIFY:		
	ARMS AND HANDS		LEGS AND FEET
	BACK NECK AND SHOULDERS		SCALP
	RATE YOUR LEVEL OF STRESS ON A SCALE FROM 1-10 (10 BEING THE HIGHEST OR DEEPEST)		
	DOES STRESS EFFECT YOUR SLEEP NEGATIVELY?	YES	NO
	DOES STRESS EFFECT YOUR DIGESTION NEGATIVELY	YES	NO
	DOES STRESS EFFECT YOUR MUSCLE TENSION NEGATIVELY?	YES	NO
	DOES STRESS EFFECT YOUR SKIN NEGATIVELY?	YES	NO
	HOW MANY HOURS DO YOU SLEEP ON AVERAGE?		

MAY WE KINDLY HIGHLIGHT THE FOLLOWING FOR YOUR ATTENTION:

In the interests of the security of our guests and staff, Kievits Kroon is a CASHLESS environment.

We do accept all major credit and debit cards.

20/09/20



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GUEST INFORMATION AND INDEMNITY FORM

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PLEASE TICK THE FOLLOWING CONDITION THAT APPLY WITH YOU:

BODY		FACE	
LETHARGY		DRYNESS	
DRY SKIN		OILINESS	
CELLULITE		SENSITIVITY	
MUSCLE ACHES AND PAINS		DARK CIRCLES	
FLUID RETENTION		FINE LINES/ WRINKLES	
POOR CIRCULATION		SUN DAMAGE/ PIGMENTATION	

TERMS AND CONDITIONS

I understand that the message / bodywork / therapies I receive is provided for the purpose of relaxation, stress reduction, and relief of muscular tension. If I experience any pain or discomfort during this session, I will immediately inform the practitioner so that the pressure and/or strokes and treatment may be adjusted to my level of comfort.

I understand that I will always be required to wear swimwear when using the public facilities within the Spa and the Spa surrounds.

I further understand that massage/bodywork/therapies should not be constructed as a substitute for medical examination, diagnoses, prescription or treatment of any physical or mental illness, and that nothing said in the course of the session(s) given should be construed as that.

Because massage / bodywork / therapies are contraindicated (should not be done) under certain medical conditions, I confirm that I have stated all my known medical conditions, an answered all my questions honestly. I agree to keep the practitioner's part should I forget to do so. It is also understood that any illicit or sexually suggestive remark or advances made by me will result in immediate termination of the session, and I will be liable for this "full" scheduled appointment.

*	I HEREBY DECLARE THAT I HAVE COMPLETED THE ABOVE CONSULTATION FORM ACCURATELY AND THAT I HAVE NOT WITH HELD ANY INFORMATION THAT MAY BE RELEVANT TO MY TREATMENT. THIS SPA WILL NOT BE HELD LIABLE IN ANY WAY WHATSOEVER.	
*	FULL NAME AND SURNAME	
*	SIGNATURE	
*	DATE	

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