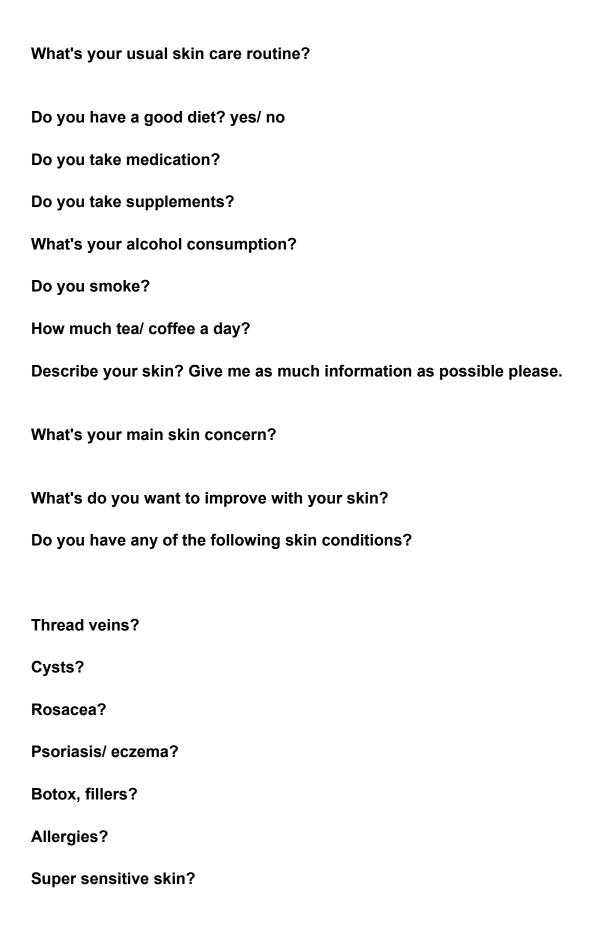


## Holistic Hands

## **Bespoke Facial Oil Consultation**

Name:			
Address:			
Phone:			
Email:			

Occupation:



Acne
Redness?
Fine lines or wrinkles?
How do you sleep?
Do you ever feel anxious?
I hereby acknowledge that Dee is making a bespoke face oil to treat my individual needs and I give my consent.
Signed:
Date:
Therapist signature: Dee Mellon