

Fractal Bodyworks
26032 Detroit Rd, Suite 6
Westlake, OH 44145
Phone 216-924-2217

*Julia Chick, Licensed Massage Therapist
Ohio Massage Therapy License #33.025108*

ORDER FOR MYOFASCIAL RELEASE

Patient name: _____

Date: _____

Myofascial Release

- P.R.N. for stress reduction or relief of _____
- P.R.N. for wellness and/or illness/injury prevention _____
- As specified: _____

Diagnoses (if applicable):

Physician Signature: _____

Physician Name Printed: _____

Physician Phone Number: _____