



Great Bay Community College

Massage Therapy Reservation Form

Welcome to the Great Bay Community College Massage Therapy Clinic. In order to expedite the appointment process we ask that you arrive early enough to pay the Account Services Representative at the One Stop, located next to front lobby.

Fee Schedule for 2010-2011 Academic Year

Client	Fee	Check One
General Public	\$30.00	
Great Bay Community College Faculty and Staff	\$10.00	
Current Great Bay Community College Students	\$5.00	

Last Name: _____ MI: ____ First: _____ DOB: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip Code: _____

Student ID #: _____

For future massage appointments call (603) 427-7646. If you would like information and specials coming to you via email from Great Bay Community College Massage Therapy Clinic contact us at greatbaymassage@ccsnh.edu. We appreciate your patience and look forward to getting you to your scheduled appointment as quickly as possible. Thank you.

Office Use Only: Do not write below this line.

Amount Paid: \$ _____ Date: _____ Initials: _____