BUSINESS & FACILITY MASSAGE THERAPY COLLABORATION AGREEMENT

This service contract ("Agreement"), is made and entered into this ___ *day of* _____, *20*____, by and between _____, ("Company/Facility") and Moonwing Massage, PLLC ("Therapist"). Both parties agree as follows:

1. MASSAGE THERAPY SERVICES
   1.1 In accordance with all local laws and regulations, the Therapist shall provide professional massage therapy services to employees of the Company/Facility starting on the _____ *day of* _____, *20*____.
   1.2 The services shall be held again for the same cost structure (*as indicated in 2.4 below*) on the following dates:

   1.2(a) _____ *day of* _____, *20*____.

   1.2(b) _____ *day of* _____, *20*____.

   1.3(c) _____ *day of* _____, *20*____.

   1.4(d) _____ *day of* _____, *20*____.

   1.5(e) _____ *day of* _____, *20*____.

   1.3 The Therapist represents that he/she holds a current, active license or registration to practice massage therapy and agrees to practice under the scope allowed by the state, county, and/or city in which he/she holds license and where the treatment is being performed, as well as uphold professional standards during all treatments.

2. COMPENSATION
   Pursuant to this Agreement, the Therapist shall render massage therapy services and be compensated ***50% down*** at the time of submitting this completed document and the remaining ***50% within 24 hours*** of completing the service, as follows:
   2.1 The cost of services will be *$___ per minute* from the time of Therapist arrival to Therapist departure.
   2.2 Payments will not be charged to faculty/staff clients by the therapist or the business, and will be made by the Business/Facility via cash, Venmo, or business check.

2.3 The Therapist shall be scheduled from _____*am/pm to*_____ *am/pm* and perform seated massage upon walk-up staff as time allows within the agreed-upon timeframe, with 2-5 minutes allotted between clients for the Therapist to sanitize their hands/arms and equipment.

2.4 The cost of services for the timeframe referenced in 2b above, shall be: *$*_____

*2.4(a) The **50% deposit** due upon completing this document shall be: $*_____

*2.4(b) The **50% balance** due within 24 hours of services shall be: $*_____

2.4(c) Clients are welcome to cash or Venmo tip the Therapist as desired.

2.4(d) The Business/Facility is welcome to add an overall cash, venmo, or business check tip to the Therapist as desired, in a separate payment from the overall charge of services for taxation purposes.

3. TERM

This Agreement shall continue until completion of the services, which is scheduled to begin on the ____ *day of* _____*, 20*_____ *at* _____*am/pm and end on the* ____ *day of* _____*, 20*_____ at _____*am/pm*.

4. POLICIES & EXPECTED BEHAVIORS

4.1 The Therapist agrees to gather appropriate health history, contact, and emergency information from all personnel receiving massage therapy services to ensure appropriate care is given during massage therapy treatment.

4.1(a) If any individual refuses to provide such necessary information, the Therapist is ethically required to refuse service to that individual.

4.2(b) The Intake paperwork for participants will be required for anyone booked for the massage before their session may begin. Business/Facility events will require all planned participants to complete the required Intake form and return it to MoonwingMassage@Outlook.com or the business should print and distribute copies, allowing clients 15 minutes to complete the paperwork prior to their treatment, in order to hand it to the therapist at the time of their session.

4.2 The Company/Facility agrees to ensure to the best of its ability that all personnel receiving massage therapy services from the Therapist will behave appropriately in all interactions with the Therapist.

4.2(a) If the Therapist deems the behavior of a staff/faculty member as inappropriate, the Therapist has the full authority to terminate all massage and bodywork treatments for said person, with full compensation paid for services whether fully rendered or not.

4.2(b) Inappropriate behavior as defined in this section includes, but is not limited to, sexual innuendos, sexual jokes, unsuitable language, conversation, and/or sexual gestures and touching.

4.3(c) Conduct concerns will be noted and reported to the Business/Facility urgently or at the end of the same day's service, depending on the nature and severity of the misconduct.

4.3 All parties of this contract agree to show no favoritism or discrimination in regards to gender, color, age, sexual orientation, education, disability, veteran's status, religion, or national origin of the clients or the therapist.

4.4 This contract serves as a guarantee of service. If the Company/Facility defaults in allowing the agreed-upon services to be rendered, the Company/Facility remains responsible for compensation as defined in Section 2.0. If the Therapist defaults and is unable to provide the agreed upon services, no compensation will be provided to the Therapist from the Company/Facility.

5. Additional Notes & Agreements:

5.1.

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6. AGREEMENT

IN WITNESS WHEREOF, both parties hereby execute and enter into this Agreement, as indicated by the signatures and dates below:

6.1 COMPANY / FACILITY AUTHORIZED REPRESENTATIVE COMMITMENT

_____

^Company/Facility Name

_____ _____

^Company/Facility Authorized Agent (*Print Name*) ^Company/Facility Authorized Agent (*Signature*)

___ day of _____, 20____

^Signed Date

6.2 THERAPIST COMMITMENT

_____ _____

^Therapist (*Print Name*) ^Therapist (*Signature*)

___ day of _____, 20____

^Signed Date