Reservation Form

Name _____ Room No _____ Address_____ Tel. _____ Treatment _____ Time in _____ Special Request _____ Reception _____	Name _____ Room No _____ Address_____ Tel. _____ Treatment _____ Time in _____ Special Request _____ Reception _____
Name _____ Room No _____ Address_____ Tel. _____ Treatment _____ Time in _____ Special Request _____ Reception _____	Name _____ Room No _____ Address_____ Tel. _____ Treatment _____ Time in _____ Special Request _____ Reception _____
Name _____ Room No _____ Address_____ Tel. _____ Treatment _____ Time in _____ Special Request _____ Reception _____	Name _____ Room No _____ Address_____ Tel. _____ Treatment _____ Time in _____ Special Request _____ Reception _____
Name _____ Room No _____ Address_____ Tel. _____ Treatment _____ Time in _____ Special Request _____ Reception _____	Name _____ Room No _____ Address_____ Tel. _____ Treatment _____ Time in _____ Special Request _____ Reception _____

Spa Card Order

Guest _____		Therapist_____
Treatment _____	Time in ____Room ____	

Oil	☐ Rose	☐ Neroli	☐ Relax	☐ Lavender
☐	Steam			
☐	Bath			
☐	Jacuzzi			
☐	Scrub			
☐	Wrap			
☐	Compress			

Guest _____		Therapist_____
Treatment _____	Time in ____Room ____	

Oil	☐ Rose	☐ Neroli	☐ Relax	☐ Lavender
☐	Steam			
☐	Bath			
☐	Jacuzzi			
☐	Scrub			
☐	Wrap			
☐	Compress			

Guest _____		Therapist_____
Treatment _____	Time in ____Room ____	

Oil	☐ Rose	☐ Neroli	☐ Relax	☐ Lavender
☐	Steam			
☐	Bath			
☐	Jacuzzi			
☐	Scrub			
☐	Wrap			
☐	Compress			

Guest _____		Therapist_____
Treatment _____	Time in ____Room ____	

Oil	☐ Rose	☐ Neroli	☐ Relax	☐ Lavender
☐	Steam			
☐	Bath			
☐	Jacuzzi			
☐	Scrub			
☐	Wrap			
☐	Compress			

Guest _____		Therapist_____
Treatment _____	Time in ____Room ____	

Oil	☐ Rose	☐ Neroli	☐ Relax	☐ Lavender
☐	Steam			
☐	Bath			

Guest _____		Therapist_____
Treatment _____	Time in ____Room ____	

Oil	☐ Rose	☐ Neroli	☐ Relax	☐ Lavender
☐	Steam			
☐	Bath			

☐	Jacuzzi				
☐	Scrub				
☐	Wrap				
☐	Compress				

☐	Jacuzzi				
☐	Scrub				
☐	Wrap				
☐	Compress				

Guest _____ Therapist_____

Treatment _____ Time in ____Room ____

Oil	☐ Rose	☐ Anti	☐ Energy	☐ Lavender
☐	Steam			
☐	Bath			
☐	Jacuzzi			
☐	Scrub			
☐	Wrap			
☐	Compress			

Guest _____ Therapist_____

Treatment _____ Time in ____Room ____

Oil	☐ Rose	☐ Anti	☐ Energy	☐ Lavender
☐	Steam			
☐	Bath			
☐	Jacuzzi			
☐	Scrub			
☐	Wrap			
☐	Compress			

Guest _____ Therapist_____

Treatment _____ Time in ____Room ____

Oil	☐ Rose	☐ Neroli	☐ Relax	☐ Lavender
☐	Steam			
☐	Bath			
☐	Jacuzzi			
☐	Scrub			
☐	Wrap			
☐	Compress			

Guest _____ Therapist_____

Treatment _____ Time in ____Room ____

Oil	☐ Rose	☐ Neroli	☐ Relax	☐ Lavender
☐	Steam			
☐	Bath			
☐	Jacuzzi			
☐	Scrub			
☐	Wrap			
☐	Compress			