

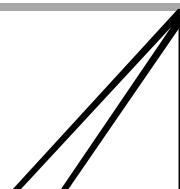
## Sarga Bodywork Practitioner Feedback

NAME: \_\_\_\_\_

EMAIL: \_\_\_\_\_

DATE OF SERVICE: \_\_\_\_/\_\_\_\_/\_\_\_\_

MAY WE USE YOUR FEEDBACK FOR MARKETING PURPOSES? YES  NO



SARGA  
bodywork

20 FORM

1. Did you feel the treatment was well balanced in pressure and execution?
2. Did you feel your practitioner moved around the table with ease and confidence?
3. Did you feel safe and secure with the technique and the draping? Overall, was there a smooth flow?
4. Did your practitioner check in with you enough about pressure and comfort during the session?
5. How do you feel Sarga Bodywork is different than other forms of massage and bodywork?
6. Would you request this style of bodywork again?

Thank you so much for your feedback!!! Any Additional Comments may be written below:)