Hull & East Riding Breast Friends

Registered Charity No: 1114143 www.herbreastfriends.org.uk

Pink Pamper Day 2022 - Invitation & Booking Forms

Please find enclosed your Registration Forms for **The Pink Pamper Day** being held at The Village Hotel on **Saturday 28**th **May 2022**. As always priority for places is given to those with a breast cancer diagnosis. Other members and guests can attend, subject to availability. Volunteers are welcome to check on the day for availability for treatments.

During the day you will have the opportunity to try various Buddleia Complementary Therapies and you must complete and return the enclosed Registration and Personal Medical History Form (signed and dated please). Please obtain <u>verbal</u> consent from your medical practitioner. **Without these forms fully completed and signed, you will not be able to have therapies on the day.** This is a requirement of the therapists and insurance company. <u>Forms to be returned by 22nd April 2022</u>, to avoid disappointment.

Please choose from the range of workshops and other activities detailed on the subsequent sheets. We will endeavour to provide you with your first choice from each section. Alternatively, if you prefer, you can just come along to enjoy the day, attend some workshops, or just sit and relax.

Why not enter our Decorated Bra competition? This year's theme is 'Butterflies'. Details of the competition can be found on the additional flyer.

We do understand that booking a day like this in advance may mean that you might not be feeling well enough to be with us on that date. As places are limited, we would be very grateful if you could let us know as early as possible if you are unable to attend so that we may offer your place to someone on the waiting list.

If you have any questions about the day or any of the enclosed forms, please call the office on 01482 221368.

Your Personal Schedule will be available upon your arrival at the Village Hotel on the day. The day starts at approximately 9.00am with registration workshops/therapies commencing soon after. The day finishes around 4:30pm. If your therapies start earlier, we will let you know prior to the day.

Due to the unprecedented times of COVID-19, we ask that guests and volunteers do not attend the day if you present with any COVID symptoms or return a positive test. Upon arrival at the hotel, your temperature will be taken at the Registration Desk. Anyone with a high recording, will be asked to leave the hotel. This is to help to provide a safe and relaxing day for all guests and volunteers.

Finally, yes, **pink** is the colour to wear if you would like to! You might like to know that we have some HER Breast Friends T-Shirts available for sale on the day. These cost £7.50 each and are available in various sizes. Other merchandise will also be available on the day.

Yours sincerely

Pam Trays Chair



The Pink Pamper Day Registration Form

Personal Details



Name:
Address:
Email:
Telephone Number:
Mobile Number:
Guests: Once again we hope to be able to accommodate some carers and/or guests. These places are subject to availability and cost £25* to cover lunch, therapies, and some refreshments. Please note that payment must be sent with this form.
*Name of Carer/Guest: (if attending): I enclose a cheque payable to HER Breast Friends for £25 to cover carer/guest.
Please ensure your guest completes the 'Guest Medical Sheet' and return it together with yours.
Buffet Lunch: (please write below if you have any special dietary requirements):

Mini Taster Complementary Therapy Menu

For **BOTH** sections, please select in order of preference, i.e 1st – most preferred, 2nd, 3rd, etc.

Section 1: Beauty Therapy		Section 2: Complementary Therapy			
	You	Guest		You	Guest
Makeover			Reflexology		
Manicure			Hand/Foot Massage		
Pedicure			Back/Shoulder Massage		
Facial			Indian Head Massage		
			Reiki/Crystal Reiki		

Please note that we reserve the right to change the above without notice

	ENTIAL MEDICAL HISTORY – Please complete in full:			
Full Name	Date of			
E II A	Birth			
Full Address				
Telephone No	Email			
Emergency				
Contact Name &				
No				
Doctors Name				
Surgery Address				
Telephone No				
Medical History - P	Please include surgery dates – For cancers, please indicate site(s):			
Chemotherapy & da	ates:			
Radiotherapy & dat				
Hickman Line or Po				
Lymphoedema:	(if yes, state where)			
	or NO to each of the following, if YES please give details:			
Heart Condition				
Epilepsy/Seizures				
Skin Disorders ME/MS/Parkinson's D	inance			
Inflammation	1500.50			
High or Low Blood Pre	essure			
Cancer (other than no				
Diabetes	,			
Thrombosis				
Circulation Problems				
Varicose Veins				
Asthma/Hay Fever Aids				
Hepatitis A, B or C Do you have or recently had any of the following, if YES please give details:				
Cuts or Bruises				
Recent Inoculations				
Are you pregnant?				
Do you have any allergies, if YES please give full details? Please use reverse of registration forms if required.				
Please list all current medication and dosage: Please use reverse of registration forms if required.				
COVID-19: Have ve	ou had BOTH COVID-19 vaccinations?			
JOINS 10. Have ye				
Declaration				
 I confirm that 	at the above details are correct and that I have requested therapies/treatments.			
 I have obtain 	ned verbal consent from my Medical Practitioner (name):			
	pies/treatments I have requested.			
Signature:	Date:			

Important – please return these <u>signed</u> documents with your Registration Forms to secure your place at the Pink Pamper Day.

Additional notes:	

GUEST CONFI	DENTIAL MED	ICAL HISTO	RY – Pleas	e comp	lete in full:
Full Name			Date of Birth		
Full Address					
Telephone No			Email		
Emergency					
Contact Name &					
No Doctors Name					
Surgery Address					
Telephone No	la a a a la alauda a a a			!!!	4
Medical History - P	lease include surç	gery dates – Fo	r cancers, pie	ase indica	ite site(s):
Chemotherapy & da	ates.				
Radiotherapy & dat					
Hickman Line or Po		(If yes, state wh	ich)		
Lymphoedema:		if yes, state who	,		
Please answer YES				give detail	ls:
Heart Condition					
Epilepsy/Seizures Skin Disorders					
ME/MS/Parkinson's Di	isease				
Inflammation					
High or Low Blood Pre					
Cancer (other than not Diabetes	led above)				
Thrombosis					
Circulation Problems					
Varicose Veins					
Asthma/Hay Fever Aids					
Hepatitis A, B or C					
Do you have or rec	ently had any of the	he following, if	YES please gi	ive details	
Cuts or Bruises					
Recent Inoculations					
Are you pregnant?					
Do you have any allergies, if YES please give full details? Please use reverse of registration forms if required.					
Please list all current medication and dosage: Please use reverse of registration forms if required.					
Please list all curre	int medication and	d dosage: Please	use reverse of regist	ration forms if	required.
COVID-19: Have you had BOTH COVID-19 vaccinations?					
Declaration					
 I confirm that the above details are correct and that I have requested therapies/treatments. I have obtained verbal consent from my Medical Practitioner (name): 					
			cal Practition	er (name	9):
for the therapies/treatments I have requested.					
Signature: Date:					
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Important -nl	ease return thes	e sianed docu	ments with v	our Regi	stration Forms to
Important – please return these <u>signed</u> documents with your Registration Forms to secure your place at the Pink Pamper Day.					
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Additional Guest notes:	

Workshop Menu

Please select in order of preference (1 being the most preferred):

Name(s):	You	Guest
Teddys T'ai Chi		
Teddy gives an introduction, to the benefits of T'ai Chi. Gentle exercises will be taught to suit the		
capabilities of the individual in a relaxed and comfortable atmosphere. Loose clothing is required.		
Laughter is the Best Medicine		
Andy Train joins us to explore the use of humour in life to help lift your mood and make you feel		
better.		
Singing for fun		
Gary Marsden will guide you through a fun filled workshop of singing and laughter. No experience		
necessary for you to fully enjoy this uplifting workshop.		
The World of Chocolate – Talk & Tasting		
Claire Bingham of Butterflies Chocolates takes you through a 'tasting journey with chocolate',		
explaining where chocolate is grown and how chocolate is made, including the many factors which		
affect the end flavours. There are various props to look at such as cocoa pod, beans, nibs, and		
shells, whilst learning how to professionally taste chocolate using all your senses, with lots of		
samples of chocolates to taste!		
Eastern Cooking with Kam		
Kam demonstrates the aromatic wonders of Eastern cooking, by whipping up some delicious dishes.		
Watch, then try cooking (and tasting!) the dishes for yourself.		
Henna Tattoos with Kam		
Kam reveals the beauty of plant based henna tattoos, using audience hands (please note if you'd		
rather not have a henna tattoo, then just come and watch). These tattoos are not permanent.		
Chakra Healing Attunement		
Lynnette Hart introduces Chakra healing Attunement. The Chakra Attunements help to open the		
chakras, balance, and harmonize, freeing them form blockages. Through a group session, using		
tuning forks to enhance the healing process, whilst providing an insight and information on the 12		
Chakra System, including what each does, and which Archangels are attuned to each chakra.		
De-stress Stretch & Relaxation		
Sandra Thompson offers a seated gentle stretch and relaxation workshop in a relaxed and		
comfortable atmosphere.		
Belly Dance & Latin Fusion		
Sandra Thompson of Sahara Dance gives a fun and easy to follow dance session, mixing various		
styles, with the aim of getting you moving and smiling! No experience required.		
Natural Product Making		
Make your own natural cosmetic products including a Lip Balm and a White Clay Mask.		
Poolside Spa Activities		
Swim, Whirlpool, Sauna, and Steam Room to be enjoyed at any time throughout the day. Please use	the vouc	chers
the second of the contract of		

provided in your registration pack, given at the beginning of the day.

Please note that we reserve the right to change the above without notice.

There will be several stall attractions for you to enjoy, including a Tombola, Raffle, Books, Bras, Jewellery, Cosmetics, Craft Stall, Chocolates and Charity Merchandise.

<u>Volunteer</u>: Please offer us an hour of your time to help us on our stalls so that we too can share the opportunity to enjoy a bit of pampering on our special day with you.

<u>Photographs:</u> Please note that official photographs may be taken at the event and may be used by <u>HER</u> Breast Friends for marketing purposes. If you have any objections to your photograph being used, please inform the office in advance and the photographer on the day.

<u>Disclaimer:</u> I hereby declare that I will not hold Hull & East Riding Breast Friends or any of its volunteers responsible for any injury or loss resulting from my participation in The Pink Pamper Day and that I have requested the above therapies and activities.

Due to the popularity of The Pink Pamper Day your prompt reply is essential to avoid disappointment. Please return this Registration Form with your Personal Medical History by 22nd April 2022 to: HER Breast Friends, Pod 6, The Octagon, Walker Street, Hull HU3 2RA. Any queries regarding your attendance at this event please call the office on 01482 221368.

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Signature:	Date:
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