

[Your Name]  
[Your Address]  
[City, State, ZIP Code]  
[Email Address]  
[Phone Number]  
[Date]

[Client's Name]  
[Client's Address]  
[City, State, ZIP Code]

Dear [Client's Name],

We are pleased to confirm your appointment for a lymphatic drainage massage. Below are the details of your appointment:

**\*\*Date:\*\*** [Appointment Date]  
**\*\*Time:\*\*** [Appointment Time]  
**\*\*Duration:\*\*** [Duration of Massage]  
**\*\*Location:\*\*** [Business Name]

[Business Address]  
[City, State, ZIP Code]

Please arrive 10 minutes early to complete any necessary paperwork. If you need to reschedule or have any questions, feel free to contact us at [Phone Number] or [Email Address].

We look forward to seeing you soon!

Best regards,

[Your Name]  
[Your Title/Position]  
[Business Name]  
[Website URL]  
[Phone Number]