Massage room rental agreement

General example for a practitioner renting treatment space. Complete the blanks and schedules, agree the operational details, and obtain local legal advice before use.

This template is a general example for educational purposes only and is not legal advice. Consult a qualified lawyer in your jurisdiction before adapting, signing or relying on it. DocTemplates does not guarantee its suitability, completeness or legal validity. To the extent permitted by applicable law, DocTemplates disclaims liability arising from use of this example. This notice does not exclude rights or liabilities that cannot lawfully be excluded.

Parties and premises

Agreement date _____ Reference _____

Space provider legal name _____

Mailing address _____

Practitioner legal name _____

Mailing address _____

Premises address and room identifier _____

_____

Use: massage treatment space and these agreed related activities: _____

_____

Occupancy authority or required landlord consent reference _____

Term and access

Start date _____ End date _____ Renewal terms _____

Space arrangement: □ Exclusive room □ Shared room during the scheduled times

Days or dates	Access start and finish	Room or access notes
_____	_____	_____
_____	_____	_____
_____	_____	_____

Include setup and cleanup time. Additional schedule attached: □ No □ Yes, reference ____

Keys or entry method _____ Storage and shared areas _____

Rent and payment choices

Parties or agreement reference _____

Complete one rent model. Use a percentage only after defining its base and obtaining advice about the proposed business arrangement.

Select the rent model

□ Fixed rent only □ Fixed rent plus percentage □ Percentage rent only

Fixed rent amount _____ Currency _____ Per: □ Week □ Month □ Other ____

Covered rental period _____

Due day or exact date _____ First payment due _____

Payment method and recipient _____

Partial-period calculation, if agreed _____
_____

Percentage rent if selected

Rate _____ % Calculation period _____

Base: receipts from these services or sales _____

Use amounts actually collected or another agreed basis: _____

Treatment of tips, taxes, refunds, product sales and payment-processing charges:
_____
_____

Statement due _____ Payment due _____

Summary records supplied and correction process _____
_____

Share only the payment information needed to check the calculation; do not include client treatment details in the rent statement.

Other payments

Item	Amount or allocation	Due date or agreed treatment
Deposit, if any	_____	_____
Utilities or services not included	_____	_____
Other described charge	_____	_____

Deposit purpose, permitted deductions and return procedure after local review:
_____
_____

Do not assume a charge, deduction, late fee or deadline is lawful merely because it is entered here. Review local requirements before agreeing it.

Equipment services and responsibilities

Parties or agreement reference _____

Identify one responsible party or describe the shared arrangement in each row. Add costs and service frequency where useful.

Item or task	Provided or handled by	Details and frequency
Treatment table and accessories	_____	_____
Linens and laundry	_____	_____
Products and consumables	_____	_____
Between-client cleaning	_____	_____
Room and shared-area cleaning	_____	_____
Waste disposal and supplies	_____	_____
Utilities and internet	_____	_____
Repairs and maintenance	_____	_____
Reception and bookings	_____	_____

Access and operating arrangements

Client waiting area, restroom and accessibility arrangements _____
_____

Scheduling conflicts, guests and access outside agreed hours _____
_____

Damage or maintenance contact _____ Contact method _____

Procedure if the room or equipment cannot be used _____
_____

Records and client information

Who handles client payments and refunds _____

Separate storage and access controls for each party’s records _____
_____

How required privacy or security arrangements will be documented _____
_____

Verify applicable practitioner, establishment, local business and privacy requirements. This checklist does not replace those requirements or determine employment or tax status.

Ending the arrangement and signatures

Parties or agreement reference _____

Notice and end of use

Contact for space provider _____

Contact for practitioner _____

Agreed notice method and address _____

Ending or renewal procedure and notice period after local legal review:

_____

_____

Checkout date and time _____ Keys returned to _____

Remove personal equipment, secure client records, clean the room and record its condition. Agreed exceptions or additional checkout actions: _____

_____

Any unresolved damage, payment or deposit issue should follow the agreed lawful process. This example does not authorize lockouts, seizure of property or immediate re-entry.

Additional terms for professional review

Identify any separate terms needed for insurance, liability allocation, disputes, interruption of use, governing law or other issues. Attach reviewed terms by title and date. Do not treat a blank as a legal rule or a waiver of statutory rights.

Reviewed attachment title and date _____

_____

_____

Changes to the completed arrangement should be documented and agreed by both parties. Confirm with counsel any required notice, consent, formality or signature procedure.

Acknowledgment and signatures

The parties record their agreed terms in the completed pages and identified attachments. Each should retain a signed copy. The instruction page and its fictional figures are not agreed payment terms.

Space provider name and role _____

Space provider signature _____ Date _____

Practitioner name _____

Practitioner signature _____ Date _____

Attachments included _____

Completing this general example

Instructions and fictional calculation only. This page is separate from the agreement terms.

Before using the form

• Confirm who can grant access to the premises and whether the property owner or a lease requires written consent.

• Describe the actual room, shared facilities and hours, including setup and cleanup. Match rent to that access.

• Choose one rent model. Define all payment periods and percentage exclusions. Mark unused fields not applicable.

• Agree equipment, cleaning, bookings, records, repairs and end-of-use responsibilities; identify any reviewed attachments.

• Ask a qualified local lawyer to review the completed arrangement, including fees, deposits, notice, termination, insurance and any consequential clauses. Check regulatory and tax requirements separately.

Fictional monthly payment example

Assume fixed rent of $600 plus 10% of collected treatment fees. In this example, tips and sales taxes are excluded, and treatment refunds reduce the base. These are illustrative choices, not recommended prices or legal rules.

Example item	Calculation or amount
Collected treatment fees	$2,100
Treatment refunds	− $100
Defined percentage base	$2,000
Percentage component	10% × $2,000 = $200
Fixed rent plus percentage	$600 + $200 = $800

If fixed rent only is selected, no percentage component is added. If percentage only is selected on these same assumptions, the example payment is $200. Record actual agreed terms on the payment page.

Check the rules for the actual location

California: CAMTC explains that certification is voluntary under state law and that local rules may require it. Texas: TDLR distinguishes therapist and establishment licensing. These examples do not describe every location or exception.

CAMTC: camtc.org/requirements-to-certify/
Texas TDLR: tdlr.texas.gov/mas/apply-establishment.htm

For federal employment taxes, the IRS considers the actual control and relationship. A rental label alone does not decide worker status. State tests may differ.

IRS: irs.gov/taxtopics/tc762 Official sources checked 23 October 2026.

Edit the DOCX, then inspect every page before printing or exporting. Keep a blank original and remove fictional figures from any customized agreement.