

Call for Nomination of WBUAP Regional Model Blind Massage Demonstration Shop as “massage business model”

Dear all,

Greetings!

On behalf of the World Blind Union Asia Pacific Regional Massage Commission (WBUAPRMC), I have great pleasure in announcing that invitation is now open for nomination of Asia-Pacific Regional Model Blind Massage Demonstration Shops.

As you know, the Model Blind Massage Demonstration Shops project aims to select some business models of blind massage shops so that blind masseurs in the region will be able to visit them, exchange knowledge and experience regarding the massage business model, and to promote the development of blind massage industry in the region.

Below is the necessary information for nomination:

Nomination deadline: July 31st, 2023

Demonstration Shop Assessment Criteria:

1. Recommended by national/ local government or social organizations;
2. Legitimate establishment and operation;
3. Fine performance in both economic and social area, able to make profits;
4. Has been operated more than 3 years;
5. The shop is opening all year round and the facilities are complete;
6. The shop has a business area more than 100 square meters;
7. The proportion of the blind masseurs within the staff should be above 30%;
8. First class management system and best massage skills in the country

or local;

9. Each masseur has completed recognized massage training with recognized certification documents;

10. Have its own operation characteristic, such as the profit model, standardization service or first class skills in any aspects, can lead the standard in the industry;

11. Has great popularity: such as receiving honors from government or social organizations, has got media interviews and customer satisfaction results certification documents;

12. Can host visiting tour for the blind anytime;

13. Reviewed and approved by WBUAP Regional Massage Commission.

Upon receipt of all nominations, the board of directors will discuss through emails so as to select the most classic demonstration shops representing their country or region.

Thank you and we look forward to receiving your nominations.

Yours sincerely,

A handwritten signature in black ink, appearing to be 'Wang Yongcheng' in Chinese characters, written in a cursive style.

Wang Yongcheng

Chairman

WBUAP Regional Massage Commission

World Blind Union Asia-Pacific Blind Massage Demonstration Shop Nomination Form

Please nominate the most classic shop(s) which can represent your country/region based on the following Model Massage Demonstration Shop Assessment Criteria

Information of the Demonstration Massage Shop

Name of the Country

Name of the Shop... ..

Name of the Owner

Shop Address... ..

.....

Tel Fax

Post code... .. E-mail... ..

Information of Recommended Organization

Name of organization

Organization Address

.....

Tel Fax

Post code... .. E-mail... ..

(please complete the form and put a “√” where appropriate)

1. Legitimate establishment and operation;

YES ☐

NO ☐

2. Fine performance in both economic and social area, able to make profits;

YES ☐

NO ☐

3. Has been in operation for more than 3 years;

Length of service (_____ years)

4. The shop is opening all year round and the facilities are complete;

Opening days per week (_____ days)

5. The shop has a business area of more than 100 square meters;

Business area (_____ square meters)

6. The proportion of the blind masseurs within the staff force should be above 30%;

Total number of staff (_____)

Blind masseurs number (_____)

7. Every employee has completed recognized massage training program with recognized certification documents;

YES ☐

NO ☐

8. Has great popularity: such as receiving honors from government or social organizations, has got media interviews and customers' satisfactory result certification documents

YES ☐

NO ☐

9. Can host visiting tour for the blind anytime;

YES ☐

NO ☐

Note: please state and include the awards/ training/ customer satisfaction result certification documents (image or scanning copy) in this form considering above results.

Brief introduction of your shop

Nomination of the above massage shop by local government

Signature... ..

Date

Approved or Disapproved by World Blind Union Asia Pacific Regional Massage Commission

Approved: _____

Disapproved: _____

(please sign with “√”)

Signature by chairman of WBUAP Regional Massage Commission

... ..

Date

QUESTIONNAIRE

Name: _____ Country/Region : _____

Your present Organization

1) Name of organization: _____

2) Total number of staff: _____ persons,
Including _____ persons with visually impairment

Are you visually impaired? ☐ Yes ☐ No

If your answer is “Yes”, please answer the following questions.

1) Please describe your eye condition.

a) ☐ totally blind ☐ low vision

(Eye sight: right eye _____ left eye _____)

b) The cause of your visual impairment : _____

2) Usually you use; ☐ printed materials ☐ Braille materials

3) For reading;

☐ You can read normal printed materials with your naked eye.

☐ You can read normal printed materials with magnifying glass / lens.

☐ You can read large print letters.

☐ You cannot read printed letters.

4) Choose how you see in your daily life ;

☐ You can ride a bicycle.

☐ You can walk around an unfamiliar place without a white cane.

☐ You need a white cane to walk.

☐ You can walk alone in daylight, but need a white cane at night time.