



## PARENT OR LEGAL GUARDIAN'S CONSENT TO TREAT A MINOR

River Stone Massage and Wellness Centre permits minors to receive massage therapy treatments from its Registered Massage Therapists, provided the Parent or Legal Guardian agrees to, acknowledges, and signs this consent form.

Parent or Legal Guardian must be present in helping complete the Health History Form for the minor, along with consent for the massage therapy session. If the Minor is capable, both the Minor and Parent/Guardian shall sign the Health History Form. Minors (all clients under the age of 18 – unless otherwise emancipated, in which case documentation must be provided) must have written Parental/Guardian consent.

In collaboration with the consenting adult and Minor, the Registered Massage Therapist will assist in establishing goals for the session(s), as well as a long-term treatment plan, if applicable. The Registered Massage Therapist will discuss health history, symptoms currently experienced by the minor, as well as methods of treatment and areas of the body that will be treated. Side effects resulting from the massage treatment, as well as homecare suggestions, will also be discussed.

For clients aged 12 and under, the Parent/Guardian must always be present onsite and are welcome to join their child in the treatment room or wait in our comfortable reception space. For clients aged 13–17, if both minor, Parent/Guardian, and Registered Massage Therapist agree that the minor can be on their own, the Parent/Guardian shall initial here. \_\_\_\_\_ Otherwise, the Parent/Guardian must be onsite during each session.

As per any massage therapy session, appropriate draping will be used at all times during the massage and only areas being massaged are uncovered.

I am the Parent/Guardian of the minor on this form and I have read the above information thoroughly and I give permission for my child to receive massage therapy treatments from the Registered Massage Therapist at River Stone Massage and Wellness Centre.

\_\_\_\_\_ Name of Minor

\_\_\_\_\_ Birthdate of Minor

\_\_\_\_\_ Name of Parent or Legal Guardian (Print)

\_\_\_\_\_ Signature of Parent or Legal Guardian

\_\_\_\_\_ Date