

Riktr Pro Massage
CONSENT FORM
MASSAGE ON A MINOR

I, _____, am the parent or guardian having legal custody of
Parent or Legal Guardian

_____. I hereby authorize _____
Minor Client **Massage Practitioner**

to administer massage treatment. I verify that the minor client is of sufficient age and aptitude as to provide verbal and written feedback to the practitioner before, during and after the massage.

I understand that I am welcome and encouraged to remain in the area where the massage is being administered. Once the massage has actually started, I agree to remain in the room to avoid distracting the recipient or practitioner. I further understand that as the parent/guardian, I have the right to place any conditions on the environment and massage on behalf of the minor. I agree to list those below in the space provided.

Signature _____
Parent or Legal Guardian Authorized Adult Custodian

Phone (Home or Cell) _____ **Date** _____

Signature _____
Date _____

Message Practitioner