



Pediatric Permission Form

I, _____ (parent's printed name) give my consent and permission for
_____ (body worker's name) to work on _____ (child's name).

I understand she/he will be using bodywork in the form of therapeutic muscle work and energy work to help balance and stabilize the neurological and muscular components of the child's body. It is also understood that the child has control of the session and can ask to stop at any point during the session if they are uncomfortable in any way.

Parent Signature

Date