

Consent for Clients Under 18

I confirm that I am the parent or legal guardian of the young person named below. I have read and understood the information in this form and consent to them receiving Thai Solution Massage from Rinyapat Thai Massage.

I understand that:

- The session will be adapted to the young person's age, health and comfort.
- The young person may decline any technique or ask to stop at any time.
- I must remain present in the treatment room throughout the session.
- JuJu may adjust, postpone, decline or stop the session if it may be unsuitable or present a risk.

Young person's full name: _____

Date of birth: _____

Young Person's Agreement

I understand what the session involves and agree to receive Thai Solution Massage. I know that I can ask JuJu to adjust the pressure, avoid any area or stop the session at any time.

Young person's signature: _____

Date: _____

Parent or Legal Guardian's Consent

Parent/guardian's full name: _____

Relationship to the young person: _____

Parent/guardian's signature: _____

Emergency contact number: _____

Date: _____