

## CONSENT FORM

During the session time, it may be necessary to touch you in what may be considered by some to be a very sensitive area. The purpose of this consent form is to obtain your permission or to deny permission for me to touch you in the following areas:

- upper chest area
- abdomen
- lower abdomen
- upper thigh
- low back/sacrum area/upper buttock area

Please sign for the following:

I give permission \_\_\_\_\_

I don't give permission \_\_\_\_\_

I give permission ONLY for the areas circled, above.

DATE: \_\_\_\_\_

Sign: \_\_\_\_\_