Minor Informed Consent

I,	hereby (and until further notice) give Manchester-Bedford
<i>Myoskeletal LLC</i> permi	ssion to provide my minor child/person under my guardianship with
therapeutic massage ser	vices as deemed appropriate to treat presenting conditions/injuries. I
understand that I am fir	ancially responsible for the minor and that all statements contained in
this consent apply equal	ly to me and to the minor
Signed:(Parent/Gua	Date:
	permission to appear for treatment without me present after the initial stand that I must make the appointments and remain responsible for
Signed:(Parent/Guz	Date: