



Farr Out Wellness  
3 Sculps Hill Road Lower Level  
Orwigsburg, PA 17961  
(570) 292-2985

## Informed Consent Agreement

- You always have personal autonomy, and you are free to pause, adjust and/or terminate your session at any time.
- Communication is key in implementing a safe & productive therapeutic massage session. If you experience any pain or discomfort during a session, you must immediately verbally communicate this to the LMT so that the pressure/strokes may be adjusted to your level of comfort. Please feel free to speak up and communicate anything you feel is relevant to the session at any time!
- The following sometimes occur during massage & bodywork:
  - stomach gurgling, movement or release of intestinal gas, needing to use the restroom
  - laughing, crying and other strong emotions or memories
  - yawns, sighs and groans (within appropriate reason)
  - sinus congestion/drainage when faced down
  - needing to move, change position, or add support (pillows, bolsters, blankets).These are normal physiological responses, and need not be suppressed or felt embarrassing. At any time during your session, I encourage you to let me know if there is anything you need to feel more comfortable.
- You understand that massage therapy should not be construed as a substitute for medical examination, diagnosis, or treatment, and that you should see a qualified medical specialist for any mental or physical ailment of which you are aware. You acknowledge that the LMT is not a physician and does not diagnose illness or disease or any other physical or mental disorder.

- Massage should not be performed under certain medical conditions. You affirm that you have stated all known medical conditions, and answered all questions honestly. You agree to keep the LMT updated as to any changes in your medical profile and understand that there is no liability on the LMT's part should you fail to do so.
- You understand that you may be sore after a session. Muscle soreness can be alleviated by drinking plenty of water before and after session, applying ice and/or heat appropriately, taking a warm shower or Epsom/magnesium salt bath, and/or by adding gentle stretching to your daily routine, especially for targeted muscles.
- Any sexual remarks or advances made will terminate a session immediately. An offender is liable for payment in full and will not be able to make future appointments.
- Draping will always be used for your privacy and comfort. While you may be as bare as you feel comfortable being beneath the covers, you will always be draped with a sheet & blanket. Only the body region being worked on will ever be exposed at a time. Additionally, no genitals or women's breasts will ever be exposed or touched at any time.
- You understand your personal information & session notes are 100% confidential, and cannot/will not be discussed or shared with any other parties (doctors/caregivers/family/third-parties) without your written consent.
- You hereby consent for the LMT to treat you with massage therapy & bodywork for the purposes noted on your Intake Form, and based on information gained from assessments & examination. You acknowledge that no assurance or guarantee has been provided to you as to the results of any treatment. You acknowledge that with any treatment there can be risks, and you assume those risks.

Updated November 2024

IN WITNESS WHEREOF, the parties hereto have executed this Agreement as of the day and year first above written.

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