

Just This Side of Heaven Massage, LLC 267-269-7388
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Informed Consent For
Upper Chest/Breast Massage During a
Medical Massage for the Breast and Chest Class

Note: This consent form and the contents contained herein is a limited consent form that shall ONLY apply to the date of the class attended. It IS NOT giving consent or permission for time except for class time. For clarity, no permission or consent is given for any treatment prior to class, during breaks, during lunch or after the end of class!

Initial Here -----

I understand and acknowledge that I am taking the class titled “Medical Massage for the Breast and Chest” From Ed Portley Jr, LMT, BCTMB Pa License # MSG002013, owner of Just This Side of Heaven Massage. I acknowledge that I agree that I am freely participating in this class, in its entirety, to learn how to help others in their pursuit of health and wellness with chest and breasts issues.

Initial Here -----

I understand, acknowledge and give my informed consent to the following conditions while attending this class:

1) The utmost care, respect and modesty will be offered during the class from everyone in attendance, including the instructor.

Initial-----

2) I will remain professional, ethical & have great moral character during the class.

Initial-----

3) I'm required to have my chest & breast exposed at specific times during the class.

Initial-----

4) To have my breasts and chest touched, massaged, squeezed, rubbed and have lotion, oil, cream, gel or any other media applied to the area by Ed Portley and the therapist in which I partner with during the class.

Initial-----

5) Any inappropriate, sexual, sensual and any other unacceptable behavior can and will result in expulsion from the class without the issuance of a certificate or a refund.

Initial-----

6) Any actions, words or behavior directed toward any student in the class that is defined in the massage therapy law as sexual abuse, sexual harassment, sexual impropriety, sexual intimacies or sexual violation will result in the police being summoned and charges filed.

Initial-----

I give full permission to the therapist and the instructor to do any or all the above techniques.

I have discussed with the instructor all questions and concerns regarding the class and its requirements, and I give consent for the date listed below only.

I understand that neither the massage therapist nor Just This Side Of Heaven Massage, LLC diagnose any illness, injuries or diseases. I understand that the class does not teach or prepare me to evaluate, diagnose, cure or treat any medical condition including but not limited to oncology massage or massage of the breast for any cancer related issues!!

Student Signature _____ Date _____



Instructor Signature

Date _____