MANLYMOVEMENT · FITNESS & WELLNESS COACH

Assisted Stretch Addendum — Hands-On Manual Therapy Consent

To be read and signed by every Assisted Stretch client, in addition to the general Liability Waiver, before their first paid Assisted Stretch (PNF/PIR-MET) session.

1. Nature of the Service & Scope of Practice

- Assisted Stretch sessions use PNF (Proprioceptive Neuromuscular Facilitation) and PIR-MET (Post-Isometric Relaxation / Muscle Energy Technique) methods, in which the Coach applies direct, hands-on contact — hands, forearms, and body positioning — to guide and apply gentle overpressure to my muscles and joints for the purpose of improving range of motion and flexibility. Sessions may also include handheld recovery tools (e.g. percussion/massage devices) applied to soft tissue.
- Victor Manly is a Fitness & Wellness Coach. He is **not** a licensed massage therapist, physical therapist, chiropractor, athletic trainer, or medical provider of any kind, in Florida or any other state.
- This addendum does not convert Assisted Stretch into licensed massage therapy, physical therapy, chiropractic care, or any other licensed manual therapy discipline, and Assisted Stretch sessions are not a substitute for those licensed services or for medical diagnosis or treatment.

2. Physical Contact & Touch Consent

- I understand Assisted Stretch sessions require direct physical contact between the Coach and me, including touching and applying pressure to my limbs, torso, neck, hips, and other muscle groups as needed to perform PNF/PIR-MET techniques.
- I voluntarily consent to this hands-on physical contact, for the sole purpose of assisted stretching as described above.
- I understand I may withdraw this consent, or ask the Coach to stop, ease off, or adjust a technique or area of contact, verbally, at any time, for any reason, without needing to explain why — and that the Coach will stop or adjust promptly when asked.
- I will tell the Coach immediately if any position or applied pressure causes pain beyond normal stretch sensation, numbness, tingling, sharp discomfort, or anything else I did not expect.

CONSENT IS ONGOING, NOT ONE-TIME

Signing this document is not blanket, irrevocable consent to any contact at any time. I understand I can set boundaries on areas of contact, decline a specific technique, or end a session early, at my sole discretion, at the start of or during any session.

3. Manual Therapy-Specific Risks

- In addition to the general risks described in the ManlyMovement Liability Waiver, I understand PNF/PIR-MET assisted stretching carries risks specific to hands-on, externally-applied stretching, including but not limited to: muscle or tendon strain from overstretching, joint hyperextension or strain, temporary soreness, tenderness, or bruising at contact points, aggravation of an existing injury or condition, and, rarely, more serious soft-tissue

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injury.

- I understand these techniques depend on the Coach's read of my verbal feedback and visible response in the moment, and that promptly and honestly communicating what I feel is as much my responsibility as it is the Coach's to keep checking in.

4. Medical Disclosure Specific to Manual Therapy

- I confirm I have disclosed, on my Client Snapshot, any condition that could make hands-on stretching techniques unsafe, including but not limited to: recent surgery, an active or unhealed injury, osteoporosis or bone fragility, a connective tissue disorder (e.g., Ehlers-Danlos syndrome), pregnancy, a blood clotting disorder or anticoagulant medication, or any condition affecting skin, joint, or nerve sensitivity.
- I understand the Coach will not apply manual stretching techniques to an area affected by a condition I have not disclosed, and that I am responsible for notifying the Coach of any change in my health status before a session, consistent with Section 3 of the general Liability Waiver.

5. Relationship to the General Liability Waiver

This addendum supplements, and does not replace or narrow, the ManlyMovement Liability Waiver, Release of Liability & Assumption of Risk that I have separately read and signed. All assumption-of-risk, release-of-liability, medical-acknowledgment, and governing-law terms in that document apply in full to Assisted Stretch sessions and to this addendum. Where this addendum and the general Liability Waiver both address a topic, both apply together; this addendum adds terms specific to hands-on manual technique and does not remove any protection in the general waiver.

6. Signature

By signing below, I confirm that I have read this entire Addendum, understand its contents, and am signing it voluntarily, in addition to (not instead of) the general ManlyMovement Liability Waiver.

Print Name _____

Date _____

Signature _____

Signature (Parent/Guardian, if under 18) _____

This document is a general-purpose template prepared for ManlyMovement LLC's internal use and has not been reviewed by an attorney. It is drafted to supplement, not replace, the ManlyMovement Liability Waiver, Release of Liability & Assumption of Risk. Waiver and consent-form enforceability varies by jurisdiction — under Florida law, a waiver or consent form must be clear, conspicuous, and specific to the activity, and cannot excuse gross negligence, recklessness, or intentional misconduct regardless of what it states. **Have this document reviewed by a Florida-licensed attorney before putting it into use**, alongside the general Liability Waiver, and before using it with any client under 18.