Energy Healing Questionnaire

Sepideh Peykar, MA, PT, DPT utilizes a comprehensive therapy that addresses mind, body & soul as one unit. It may include but is not limited to guided imagery, energy medicine, understanding of emotions based on body ailments, color therapy and deep soul talk. In summary, it is a process that takes you to a deeper level of understanding your blockages and is driven by your desire to know the truth and remedy the issue at hand. Aids in releasing emotional trauma, increases inner peace, expands spiritual growth and fulfillment, reduces anxiety and fears, rehabilitates emotional, physical and spiritual illness and strengthens self-love.

Welcome! Enjoy your personal growth & development

Please read through the entire questionnaire for payment and cancellation policy

Please note this therapy is for both women and men. Please note this questionnaire & all sessions with Dr. Peykar are strictly confidential

** If you need more room to answer any of the questions, please do so on a separate paper

| Date: | please circle where applicable |
|--|---|
| First, middle & last name | |
| | |
| | |
| Hebrew Name - your full name bat/ber | n your mother's full name |
| Exact address with State/City & Countr | y & Zip Code |
| | |
| Phone Number / WhatsApp & best tim | es to reach you - Home & Cell |
| Best way to reach you? Circle all that a | pply: Phone / Email / WhatsApp / Facebook messenger / Other |
| E-mail Address: | |
| | |
| Date of Birth - month/date/year & age | e - English & Hebrew dates |
| | |
| Do you currently work? What type of w | vork do you do? |

| Are you named after someone? THIS IS A VERY IMPORTANT QUESTION. Everyone is named after |
|---|
| someone or in association with the memory of someone, once known. Please take the time to think |
| about it. If so, who and what do you know about that person |

Marital Status: Single/Married/Divorced/Widow

If married - how long & which number marriage is it? YES / NO

Do you have any children/stepchildren? If so, how many & what are their genders & ages? YES / NO

Are your parents alive? If not, how long ago did they pass away? YES / NO

Do you have siblings? If so, how many & what are their genders & ages? YES / NO

Any medical issues (physical /emotional) in the family? If so what & who has them? YES / NO

Have you ever been diagnosed with any medical/emotional/mental issues by your doctor? Any operations/hospitalizations in the past? Please provide details of diagnosis including when you were diagnosed. YES/NO

Do you have any particular traumatic event/s you would like to mention? If so, please mention age/s and details?

How would you define your emotional state right now and how long has it been? Please circle all that apply and provide details (depression, calm, lazy, hyper, anxious, angry, sad, frustrated, unstable, unmotivated, lost, confused, in trauma, repressed, detached, panic, experiencing loss of someone, mental illness, spiritual crisis, domestic abuse, domestic violence, other...

| Are you taking any regular medication? (please list their names and daily dosage) Do you know of any vitamin/mineral deficiency? YES/NO |
|---|
| Have you had counseling previously, alternative intervention or medical treatment regarding any of these issues? Please provide more detail YES/NO |
| What motivates you to create changes you are looking for in your life? |
| What are your greatest challenges? |
| |
| Do you have the support from friends and/or family? YES/NO/I haven't asked for help |
| How do you practice self-care? Please circle all that apply & explain – meditation, yoga, healing sessions, spending time alone, spending time in nature, social activities, short get-a-ways, vacations, reading a book, studying, exercise, other; please specify |
| How familiar are you with energy therapy? Please circle one & explain - Previously used/Vaguely know/No knowledge |
| Is there anything else you would like to share? |
| |
| Why have you decided to seek assistance & what would you like to discover about yourself through these sessions |
| Please specify 2 major areas/issues you wish to get help in and see a change |
| 1) |
| 2) |
| What is your favorite color? |
| |

How Does Energy Therapy work?

Dr. Peykar does not require any personal meeting or formal interaction before or during the actual energy clearing session. The information provided in this questionnaire and picture are used as energy modality connections to do the session with. This means that on the day of your energy session you do not need to make yourself personally available at any time or change your routine while the energy clearing is being done.

If you are filling out the questionnaire in the name of someone else, please answer all questions as though they are filling it out themselves (ex. Their name, parental and sibling information, birthdate, traumas, health issues, etc.)

On the scheduled day of your energy session or latest by the following day, Dr. Peykar will leave you an audio voice note with the session summary report and all the findings of your energy session through the email or WhatsApp you provided. It will include all of the findings on the energy fields including emotional, spiritual, physical and mental blockages plus a review of what energy clearing has been used to help bring relief and release with God's help.

It will be determined at the end of the first session how many more and how often future sessions will be needed. Generally, 3-5 additional sessions after the initial first session are required at regular intervals to complete the series and work through the emotions and energy blockages and layers. However, this is solely a guesstimate and without doubt varies from person to person. Some sessions may be scheduled once a week, others every other week, and some even once in three weeks. After the first series, it is suggested to schedule at least one additional follow up/maintenance session 2 weeks after in order to check the energy alignment and maintain the clearing that was given via the series. Some may need more than one recommended series and long-term maintenance; all assessments and suggestions will be discussed and confirmed with the client.

After the first session, you will be asked if you wish to schedule the recommended series of sessions, they are not automatically scheduled unless confirmed by you. In the event that you wish to continue after the first session, you will need to decide whether you wish to schedule the entire series, we cannot schedule less than the number of recommended sessions per series, after the first session. You may be given exercises or meditations to help the clearing process. It is essential to do them for continual emotional and energy support and lasting results. You are not allowed to share the exercises or meditations with anyone else, they are strictly for you.

Within the series Dr. Peykar may likely suggest doing one or two phone sessions to include energy conscious work and somatic guided exercises to advance energy clearing.

Mode of communication between sessions with Dr. Peykar: your questions, thoughts, and feedback after receiving your session audio report should be done via short concise communication via whatsapp text or audio or email writing or audio. Questions should be addressed in a separate audio or bullet point text in order to ensure focused attention and that they not be 'lost' in communication.

Dr. Sepideh Peykar can be reached through her website: sepipeykar.com or her cell 516-455-6577. You may leave a voice or text message.

Payment:

Regarding payment, please note that payment is required in advance of each session no later than 1 week before your scheduled date. Please ensure payment is done in a timely fashion. Please pay for one session at a time as is scheduled (not all sessions at once). You can pay through PayPal, Venmo or Zelle

Each session cost is \$200 (US dollars).

<u>Cancellation policy</u>: If you choose to cancel after scheduling your Energy Therapy session there will be a \$100 (US dollars) cancellation fee – please consider this before scheduling, there is no exception. ** This is because there is a limited amount of session slots and canceling will cause a loss in rebooking that slot.

** Rescheduling, cancellations, or withdrawals must be done no less than 2 weeks in advance to avoid a cancellation charge. **

The following is required no later than 1 week before your scheduled date. Please email to sepi@sepipeykar.com.

- 1. The questionnaire filled out
- 2. A recent picture (up to 1 month) ONLY of yourself or the person the session is for (without others)
- 3. A copy of the payment transaction all sessions must be prepaid up to no later than one week before scheduled session date. Please honor this.
- 4. Signed form of therapy treatment (next page)

Looking forward to being part of your self-growth and development.

Website: www.sepipeykar.com

In love and light,

Sepideh Peykar, MA, PT, DPT