**WINDOW TO YOUR SOUL, LLC**

**18669 Esquire Way**

**Farmington, MN 55024**

**651 359 3218**

**Jodi A. Dianchrist**

**Belief Code Practitioner**

**Body Code Practitioner**

**Emotion Code Practitioner**

**CLIENT DISCLAIMER:**

Utilizing the Belief Code® and identifying faulty core beliefs and faulty core

identity along with releasing and correcting any associations in the Body Code® and/or the Emotion Code®, or any other type of healing modality practiced by

Jodi A. Dianchrist is not a substitute for medical care. The Belief Code/The Body Code®/The Emotion Code® helps to promote harmony and balance within, relieving stress and supports the body’s natural ability to heal.

Any work we do together is not intended as medial advice and should not be used for medical diagnosis or treatment, nor should it be considered a replacement or consultation with a healthcare provider. Any suggestions regarding supplements or remedies are merely suggestions.

All sessions are confidential, and all personal information will be protected to maintain your privacy, unless required by law.

I agree to not involve Jodi A. Dianchrist in court proceedings regarding treatment, criminal, or any other matter now or in the future. Nor will she be asked to share my records regarding any such proceedings.

I understand this disclaimer completely and agree to it in full.

CLIENT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CLIENT SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IF CLIENT IS A MINOR, GUARDIAN NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

GUARDIAN SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

WITNESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_