



Informed Consent

Animal Name: _____

_____ I certify that I am the legal owner or caregiver and accept full responsibility for the animal listed above. I agree to assume all liabilities, financial and otherwise, for the behavior and health of my pet. In consideration of services rendered by Diana Hardy and Radiance Wellness Services, LLC, I agree to waive any and all claims, actions, or demands of any nature, foreseen or unforeseen, against Diana Hardy Radiance Wellness Services, LLC relating to the care, control, health, and/or safety of my pet arising during services performed at or by Radiance Wellness Services, LLC.

_____ I affirm that I have answered all questions accurately and honestly and have disclosed all my pet's known conditions. I realize the importance of notifying Radiance Wellness Services, LLC of any changes that may affect my pet's health profile and accept responsibility for doing so.

_____ I understand that Radiance Wellness Services, LLC does not diagnose, prevent, or treat illness, disease or any other physical or behavioral conditions. I understand that these services are not a substitute for medical care, treatments and/or diagnosis, and it is recommended that I see a qualified veterinarian for any physical or behavioral condition my pet may have.

_____ I acknowledge that I have not been asked to stop/discontinue my pet's care provided by their veterinarian or other qualified animal specialist. I understand that I need to seek medical attention from a qualified veterinarian when appropriate.

_____ I understand that integrative medicine information, data and drug/herb/supplement interactions databases are constantly updated as new information becomes available and that Radiance Wellness Services, LLC may not be able to anticipate and explain all potential risks and complications due to the ever-changing nature of the field. I agree to allow Radiance Wellness Services, LLC to exercise their best judgment in my pet's care based on the information available at the time of visit.

_____ I understand that I have the right to choose which recommendations to incorporate into my pet's care, and that Radiance Wellness Services, LLC implies no guarantee concerning the results intended from any services and/or recommendations provided to my pet. I understand that I may refuse any or all treatment suggestions at any time.

_____ I understand Radiance Wellness Services, LLC will take every precaution to minimize or eliminate negative reactions as much as possible.

_____ I understand that not following the entire protocol recommended may affect the results of my pet's care plan and that they may not achieve the stated goals if the protocol is not followed.

Aromatherapy Services

_____ I hereby give my permission for Diana Hardy and Radiance Wellness Services, LLC to design an aromatic program for my pet based upon their unique needs. I understand that essential oils and aromatherapy is a complementary holistic therapy and not intended to treat, diagnose, and/or cure any medical issues.

I have chosen the following essential oil application method:

_____ Self-Administration – I am comfortable diffusing and/or applying the recommended oils myself. I certify that I do not have any known allergies, sensitivities or medication contraindications to the recommended oils or carrier oils.

_____ Self-Administration – I am comfortable diffusing and/or applying the recommended oils myself. I have an allergy, sensitivity, and/or medication contraindication to the recommended oils; however, I agree to accept liability for any adverse reactions that may occur.

_____ DAS Administration – I am not comfortable diffusing and/or applying the recommended oils myself. I hereby give my permission for Diana Hardy and Radiance Wellness Services, LLC to use and apply the recommended oils to my pet.

_____ DAS Administration – I am not comfortable or have been advised not to diffuse and/or apply the recommended oils due to an allergy, sensitivity, and/or medication contraindication. I hereby give my permission for Diana Hardy and Radiance Wellness Services, LLC to use and apply the recommended oils to my pet.

I understand the following:

- I am only being advised to use pure, therapeutic grade essential oils.
- I must keep all essential oil products out of the reach of children.
- Essential oils could be dangerous if swallowed.
- Essential oils could be dangerous if not properly diluted.
- Essential oils must be stored in a cool, dark place.
- Essential oils may irritate the skin if not stored or used properly.
- Essential Oils must be used as directed.

Light Therapy Services

_____ I hereby give my permission for Diana Hardy and Radiance Wellness Services, LLC to perform the LED light therapy we have discussed for my pet based upon their unique needs. I understand that light therapy is a complementary holistic therapy and not intended to treat, diagnose, and/or cure any medical issues.

I understand the following:

- There are certain contraindications that would preclude myself or my pet from receiving or being exposed to LED treatments, including epilepsy, medications causing light sensitivity, open wounds, pregnancy, and thyroid conditions.
- Reactions are rare, but may include nausea, dizziness, weakness, and possible skin reactions including redness and/or other irritations.
- Additional conditions could occur or be discovered during the procedure which could affect mine or my pet's ability to tolerate the therapy.

I understand all the facts given to me in this form. I give my consent for Diana Hardy and Radiance Wellness Services, LLC to provide the recommended services to my pet. I agree to accept the risks and hold them harmless for any injuries or negative affects myself or my pet may experience as a result of the products or services received. This includes any conditions that were present, but not disclosed at the time of service.

I agree that this constitutes full disclosure, and that it supersedes any previous verbal or written disclosures. I certify that I have read, and fully understand, the above paragraphs. I attest with my signature below that Diana Hardy has discussed all the information on this form, that I have had the chance to ask questions and that all of my questions have been answered.

Owner Name (Please print): _____

Owner Signature: _____ Date: _____