## **Legal Notice Disclaimer**

Shamanic • Energy • Sound • Transfiguration Work

Request and Consent Form

The mysticlakestudio.com Web site is designed for general educational and informational purposes only and does not render medical advice. The information provided through mysticlakestudio.com Web site should not be used for diagnosing or treating a health problem or illness. It is not a substitute for professional health care, and is designed to support-not replace-the relationship you have with your health care provider.

If you have or suspect you may have a health problem, consult your health care provider. If you think you may have a medical emergency, call your doctor or emergency medical services immediately.

Before any energy, sound, transfiguration, and Shamanic energy work is done, you must sign the consent form that indicates you understand that any energy, sound, transfiguration, and/or Shamanic energy work done by Robbin R. McCrum—Mystic Lake Studio, LLC, is not a physician/patient relationship with you. It will not provide a medical diagnosis, prescribe medicine, give psychotherapy for any physical, emotional, or mental illness, and is not a substitute for medical treatment. It is your option to seek medical attention for any physical, emotional, and mental ailments as needed. None of the energy, sound, transfiguration, and/or Shamanic energy work is reimbursable by medical insurance.

By Signing Below, I hereby represent and agree as follows:

- I am over 18 years of age; or, I am the parent or legal guardian of the subject of the energy, sound, transfiguration, and/or Shamanic energy work.
- I wish to obtain energy, sound, transfiguration, and/or Shamanic energy work.
- I understand that no physician-patient relationship is established through my participation in this energy, sound, transfiguration, and/or Shamanic energy work.
- I understand that the energy, sound, transfiguration, and/or Shamanic energy work is not psychotherapy.
- During and/or after the energy, sound, transfiguration, and/or Shamanic energy work, a list of available options or solutions will be described, but I agree that before undertaking any of these options or solutions, I can choose to consult my physician or

other health care practitioner whose care I am currently under.

- I understand that Robbin R. McCrum, Mystic Lake Studio, LLC, reserves the right to refuse to do energy, sound, transfiguration, and/or Shamanic energy work or end a session, at any time and will not bill you for her time.
- I understand that any energy, sound, transfiguration, and/or Shamanic energy work provided is not medical diagnosis, medical treatment, or medical advice.
- I understand that as a practitioner of energy medicine—energy, sound, transfiguration, and/or Shamanic energy work will not provide prescription, treatment, or psychotherapy.
- I understand that energy, sound, transfiguration, and/or Shamanic energy work is not reimbursable by medical insurance.
- Cancellation Policy: 24 hours before your scheduled appointment time. Or, you will be billed for the scheduled session.

Print Name	Signature
Print Name - Parent of Legal	Guardian Signature - Parent or Legal Guardian
Date	
Address	
PhoneEmail Address	<u> </u>
Appointment Date/Time	

Disclaimer and Consent Form must be signed to schedule and confirm an appointment.

Please e-mail PDF Disclaimer and Consent Form to <a href="mailto:mysticlakestudio@aol.com">mysticlakestudio@aol.com</a>

An invoice will be created through Pay Pal and/or Square and emailed to you for the payment of the scheduled appointment.

Robbin R. McCrum—Mystic Lake Studio, LLC—Energy Medicine Practitioner—Shamanic Energy Work, Sound, and Transfiguration Work.

## Contact

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