

Conscious Completion, Inc. * Pre-Session Form for work with Laurel * 425-572-0224

Name: _____ Session Date: _____

(Please bring this with you to your session or have it available for your phone session)

What current questions or concerns do you wish me to address:

Please state your current wishes and any new goals you want to manifest:

What beliefs are you currently having which may be blocking your optimal health?

What has helped you to detach from old limiting beliefs and judgments?

What was helpful from your last session?

Between sessions your body and nervous system are finding a “new normal”. Please stay free of judgments. Allow yourself to be where you are at, witness and breath. If it is helpful, list body sensations or symptoms including Location, Duration, Character (sharp, dull, pressure, etc), Alleviating/Aggravating factors, Temporal pattern (every morning, all day, etc) you think you need to tell me about:

Symptoms, issues, or current conditions/experiences you wish to note between sessions:

New meds, herbs/diet changes/exercise changes/sleep changes:

What has changed or is changing because of your prior session/or since your prior session:

What additions have you made to your new energetic field/how are you more in alignment with your heart's desires?

Any additional generational information you were able to find out from your family:

Any additional life events your remembered which would be helpful for you to share with me:

The Resource page of the website provides support for your use between sessions.