

# Dr. Nguyen Advising

## Parental/Legal Guardian Consent Form | Client Liability Waiver

**Dr. Nguyen Advising** is a private academic & career consulting business designed to help clients achieve their education, career, and life goals.

I understand that **Dr. Nguyen Advising** will be conducting 1:1 Zoom meeting with my child as a service. I hereby give my full consent and approval for my child to participate in this service. I understand this service is not clinical or therapeutic practice in anyway and will not regard it as such. I understand that if my child experiences a shift in their emotional, intellectual, spiritual, or other personal mental state due to some practice, methodology, dialogue, or other form of communication before, during, or after this service, I will release Dr. Nathan Nhat Nguyen and **Dr. Nguyen Advising** of any and all liability whatsoever. I understand that all services are non-refundable. I further understand that this service does not guarantee any outcome or specific result. I will provide proof of my identity and proof of my child's identity to Dr. Nathan Nhat Nguyen and **Dr. Nguyen Advising** when requested.

I hereby waive all liability for any damage, loss, personal, financial, emotional, spiritual, intellectual, psychological, physical, or bodily injury to any property or person, or for any type of loss or injury caused by hiring Dr. Nathan Nhat Nguyen and **Dr. Nguyen Advising**. This waiver shall apply to Dr. Nathan Nhat Nguyen, **Dr. Nguyen Advising**, and all personnel, heirs, assigns, and survivors.

Should any part of this waiver be invalid, the remainder of the waiver shall remain in full force and effect. By signing this document, I agree not to hold Dr. Nathan Nhat Nguyen and/or **Dr. Nguyen Advising** liable for any reason whatsoever.

- Dr. Nguyen Advising may post publically testimonials and/or photos I may share.**  
(Facebook, Website, Print, etc.)
  
- I prefer to maintain my status and my child status as a client with Dr. Nguyen Advising as private and strictly confidential.**

PRINTED NAME OF CHILD:

\_\_\_\_\_

PRINTED NAME OF LEGAL GUARDIAN:

\_\_\_\_\_

SIGNATURE OF LEGAL GUARDIAN:

\_\_\_\_\_

DATE SIGNED:

\_\_\_\_\_