

Client–Practitioner Agreement and Terms of Service

This Agreement (“Agreement”) is entered into by and between **the Practitioner** and **the Client**, concerning the provision of professional consultation or treatment services.

Homeopathic one-on-one sessions consider your current state of health and the symptoms you are experiencing to select homeopathic remedies that are best suited for you at this time. For chronic conditions it is important to plan for follow-up sessions to assess your continuing overall health picture and determine your ongoing treatment plan. Follow up sessions are normally scheduled between 4-8 weeks.

The following information is intended to facilitate a common understanding of rights, roles, and responsibilities. If you have any questions, please ask for clarification.

1.0 Relationship and Scope of Service

1.1 This Agreement defines the terms governing the professional relationship between the Client and the Practitioner. The relationship is built on mutual trust, respect, and clear communication.

1.2 The Client agrees to disclose all relevant information about their health, lifestyle, and background to ensure appropriate and effective support. The Practitioner’s services are complementary and are **not a substitute** for conventional medical or psychological treatment. The Client remains responsible for their own well-being and is encouraged to seek appropriate medical advice when necessary.

1.3 The Client acknowledges that the Practitioner is a homeopath and not a medical doctor. As such the Practitioner can not diagnose, treat, or prescribe for any particular symptom, disease, or condition and that the therapy and information offered should not be construed by the client, to be a medical diagnosis of any disease or injury. The Client agrees that the goal of homeopathy is to increase their/their child’s general vitality, constitutional strength, and support the body’s healing processes using natural methods.

2.0 Confidentiality and Data Protection

2.1 The Client authorizes the possible discussion of their/their child’s case notes between the Practitioner and other licensed homeopaths for the purpose of seeking assistance and input in their best interest regarding homeopathic remedy selection and/or symptom analysis. The Client’s right to privacy will be protected by withholding their name and any other identifying information. All sessions and communications between the Client and the Practitioner are strictly confidential.

2.2 Information disclosed in a one-on-one homeopathic session is confidential and may not be revealed to anyone, without written permission, except where disclosure is required by law or as outlined in the immediately preceding paragraph. Disclosure may be required in the following circumstances: a reasonable suspicion of child or elder abuse; a reasonable suspicion that a client presents danger to him or herself or to others.

2.3 The Practitioner shall maintain all Client data securely and in compliance with applicable data protection laws. Further information on how data is collected, stored, and managed is available in the Practitioner's **Data Protection and Privacy Policy**.

2.4 Call and Session Recordings: Some calls or online sessions may be recorded for quality assurance, training, or service improvement purposes. Clients will be notified before any recording takes place, and all recordings will be securely stored and deleted in line with data protection standards.

2.5 The Client agrees that, unless requested in writing, email or other electronic means such as text is used to contact clients regarding homeopathic remedies recommended, appointment information, and to answer client questions, and although normally safe, email and text are not encrypted and not an entirely protected means of communication.

3.0 Treatment Expectations and Process

3.1 The Practitioner shall provide professional care and guidance, which may include assessment, consultation, and the recommendation of appropriate remedies, strategies, or lifestyle adjustments.

3.2 The Client acknowledges that results vary depending on individual circumstances, the nature of the issues addressed, and adherence to agreed recommendations.

3.3 The Client understands that meaningful progress may take time and that temporary fluctuations in wellbeing may occur as part of the natural improvement process.

3.4 The Client acknowledges that homeopathic remedies can be taken at the same time as conventional pharmaceutical medications. If the Client is taking prescribed conventional medications, the Client agrees to remain under the care of their physician and follow his/her recommendations for medication dosing. The Client acknowledges that the Practitioner does not have the authority to recommend changes in conventional medication dosing. The Client understands that, during the process of homeopathic treatment, as their symptoms improve, it might become necessary to adjust conventional medication dosing and this can only be done through their prescribing physician.

4.0 Practitioner's Commitment

4.1 The Practitioner will act with honesty, professionalism, and integrity in all interactions.

4.2 The Practitioner shall be contactable by email for relevant treatment or consultation matters.

Responses will typically occur during standard working hours; however, response times may vary depending on the Practitioner's schedule.

4.3 The Practitioner may have designated days off and may not be available for communication outside standard working hours.

5.0 Client's Obligations

5.1 The client acknowledges they are over 18 years of age and has voluntarily chosen homeopathic support for themselves or their child.

5.2 The Client agrees to respect and prioritize scheduled appointments, acknowledging that each session time is reserved exclusively for them.

5.3 The Client shall raise any concerns or dissatisfaction about the service directly with the Practitioner in a timely and respectful manner.

5.4 The Client shall follow the agreed treatment plan or recommendations to achieve optimal results.

5.5 Submission of Documentation: All required intake forms or documentation must be submitted prior to the initial assessment. Failure to provide the necessary documentation in time may result in cancellation of the session without refund, at the Practitioner's discretion.

5.6 The Client certifies they are not an agent or representative for any governmental or non-governmental agency or organization whose purpose is to enforce a legal code, act or statute where no man or woman has been harmed, or to carry out any mission of entrapment or investigation, as this will be considered trespass by way of barratry with immediate liability to pay compensation under this agreement, in the amount of \$250,000 plus \$100/minute said trespass continues

6.0 Payment Terms

6.1 Payment must be made **in full** prior to the scheduled appointment, unless otherwise agreed in writing.

6.2 Additional services, remedies, or materials provided between sessions may incur extra charges, which will be communicated in advance.

6.3 Failure to make payment as agreed may result in suspension or termination of services.

6.4 Fees are to be paid by cash, check, Venmo, Paypal, or by credit card through the website: www.naturally4life.com; barter is also an acceptable form of payment.

6.5 Rates are subject to change and will be reflected on the Practitioner's website: www.naturally4life.com. When a rate increase happens, established clients will be grandfathered at their current rate for a period of 6 months. After 6 months Client agrees to pay the current rate reflected on the Practitioner's website.

6.6 Additional information regarding the Fee Schedule can be found in the Practitioner's **Agreement on Cancellation and Consult Fees**

7.0 Cancellation and Rescheduling Policy

7.1 Clients will receive booking confirmations and reminders ahead of scheduled appointments.

7.2 A **minimum of 24 hours' notice** is required to cancel or reschedule an appointment. Cancellations made **more than 24 hours before** the session are **fully refundable** or may be rescheduled without penalty.

7.3 If the Client cancels **less than 24 hours before** the session, fails to attend, or misses the appointment without prior notice ("no-show"), the **full session fee will be retained**, and no refund will be issued.

7.4 If the Practitioner is able to fill the vacated slot from a waiting list, the cancellation fee may be waived at their discretion.

7.5 Sessions cancelled by the Practitioner due to illness, emergency, or other unforeseen circumstances will be rescheduled at no additional cost or fully refunded.

7.6 The Client is responsible to submit the initial assessment form before the first session. In case of failure to submit all forms, the practitioner may retain the full session fee.

8.0 Delays and Adjustments

8.1 If the Client expects to be late for a session, they must inform the Practitioner as soon as possible.

While the Practitioner will make reasonable efforts to accommodate minor delays, session times cannot be extended beyond the originally scheduled end time.

9.0 Limitation of Liability

9.1 The Practitioner shall perform all services with reasonable care and skill. However, no outcome can be guaranteed.

9.2 The Practitioner shall not be liable for any indirect, incidental, or consequential damages, including loss of income or emotional distress, arising from the use or inability to use the services.

9.3 The Practitioner's total liability shall not exceed the total amount paid by the Client for the specific services giving rise to the claim.

9.4. The Client acknowledges that homeopathy is designed to support the body's ability to self-regulate and that their/their child's symptoms or illness may or may not lessen with this treatment. The Client is aware that the outcome and duration of homeopathic support varies by individual and cannot be guaranteed and that the Practitioner offers no warranty or guarantee as to the outcome of the homeopathic support.

10.0 Governing Law and Dispute Resolution

10.1 This Agreement is governed by law and not legal codes, acts or statutes and may be settled only by private arbitration and I, and my heirs, executors, administrators, or assigns give up the right to sue, file a complaint against the Practitioner in court or seek trial by jury.

10.2 In the event of a dispute, both parties agree to attempt resolution through **good faith negotiation and mediation**.

11.0 Acknowledgement

By booking and paying for a session, the Client confirms that they have read, understood, and agree to these Terms of Service.