

# Distance Reiki Request Form

Date : \_\_\_\_\_

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

I accept to be notified by Inner Buddha of promotions by email \_\_\_\_\_ (please initial)

Billing Address:

Street \_\_\_\_\_ Unit/Apt. \_\_\_\_\_

City: \_\_\_\_\_ Province \_\_\_\_\_

Postal Code \_\_\_\_\_

What is your primary health concern?

Physical? \_\_\_\_\_ Emotional? \_\_\_\_\_ Spiritual? \_\_\_\_\_

**Please advise the following:**

Have you had experience with Reiki before? Yes \_\_\_\_\_ No \_\_\_\_\_

What goals do you hope to attain using Reiki treatments?

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During your session what type of meditation music would you prefer?

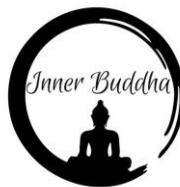
\_\_\_\_\_ Ocean Sounds

\_\_\_\_\_ Piano music

\_\_\_\_\_ No Preference

\_\_\_\_\_ Nature Sounds

\_\_\_\_\_ Spa Music



*Reiki is to be performed in conjunction with your medical health care plan. Please keep in mind Reiki is not a replacement for traditional medical treatments. Inner Buddha respects the privacy of our client's personal information and will not share any information with any third party.*

# Distance Reiki Request Form

**Note:** Please allow 45 mins – 1hour for your session. All distance sessions are done virtually Via Zoom Meetings, you will be emailed a link to join the meeting the day of the session, so we will still be face to face. All you will need to do is to be in a quiet room where you can be seated comfortably or laying down, and will not be disturbed. You may wish to use essential oils or incense to enhance your healing session, that is totally fine, if you so choose.

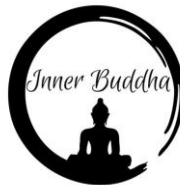
Please sign below, once you have completed your form please scan or take a picture and email to Tricia Schinkel

**findyourinnerbuddha@gmail.com**

## **Agreements:**

I understand that Reiki is a simple, gentle, energy technique that is used for stress reduction and relaxation. I understand that Reiki practitioners do not diagnose conditions, nor do they prescribe or perform medical treatment, prescribe substances no interfere with the treatment of a licensed medical professional. I understand that Reiki does not take the place of medical care. It is recommended that I see a licensed physician or health care professional for any physical or psychological alignment I may have. I understand that Reiki can complement any medical or psychological care I may be receiving. I also understand that the body has the ability to heal itself and to do so, complete relaxation is often beneficial. I acknowledge that long term imbalances in the body sometimes require multiple sessions in order to facilitate the level of relaxation needed by the body to selfheal.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_



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