

CLIENT INFORMATION LETTER AND CONSENT FOR SESSION(S)

Date _____

Dear _____,

I am a board-certified Doctor of Naturopath, certified Master Life Coach, EFT and Matrix Reimprinting Practitioner.

It is important that you understand that I do not medically diagnose or prescribe treatment. If you have a physical injury, disease condition, or mental health disorder, you must be in the care of a licensed professional. Any information you share with me during our session is always kept confidential, except in certain situations of child or elder abuse, or imminent harm to self or others.

EFT is currently not officially identified as an evidence-based technique and may be considered experimental. Since EFT's risk and benefits are not fully known, you agree to assume and accept full responsibility for any and all risks association with participating in the Session(s) and using EFT.

By signing this document, you grant to me permission to conduct the Session(s), You agree to forever fully release and hold me, Candy Lewis Williams, Candy Lewis Enterprises, LLC., The Lotus Concept Wellness and The Tapping Lotus, harmless from and against any and all claims or liability of whatsoever kind or nature which you might incur as a result of your voluntary decision to participate in the Session(s).

Please indicate your acceptance and agreement on _____ Date _____ by signing in the space provided below.

Signed: _____ Practice Client Signature Print Name

If you are submitting this Agreement electronically, typing your name in the space provided above will be considered your signature and constitute your acceptance and agreement of this Agreement.