

www.jadevictoriafx.com.au

Reiki Intake and Consent Form Personal information: Name: Date: Mobile: Home phone: Preferred method of contact: [] SMS [] Call [] Email Best time to be reached: Address: City: Postcode: State: Gender: [] Male [] Female [] other: Birth date: Age: Occupation: Phone: **Emergency contact: General information:** Do you have difficulty laying on your back? Yes/No Are you sensitive to any perfumes or fragrances? Yes/No Are you sensitive to gentle or light touches? Yes/No Have you had a reiki session before? Yes/No If yes, when? How did you hear about us: What is the reason for coming to the reiki session today? []Stress relief (anxiety) []Pain relief []Relaxation []Healing old wounds or trauma []Healing from past or current relationship. []Spiritual growth []Other:



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Reiki

Reiki is gentle, yet effective healing modality that helps promote relaxation, and may assist with natural healing on oneself as well used in self-improvement. It works by using quantum energy to assist in promoting the self-healing of the person on many levels such as emotionally and spiritually by bringing back balance to the chakras and may help to align to them. It is non-invasive and uses no pressure or manipulation on the client. This servicer is not a replacement for medical treatment.

Disclaimer

I would like to clarify I am not a licensed therapist, physiatrist, or medical practitioner; you should always seek help from a medical professional. Therefore, I do not offer any medical diagnosis, treatments, any counselling, or advice. Everything we discuss here is for entertainment purposes only. Always seek help from a trained medical professional.

Client Consent
I understand that the healing session done at JadeVictoriaFX involves natural healing methods of energy balancing for the purposes of stress reduction, relaxation, and healing. Our healer here at JadeVictoriaFX will not interfere with any medical professionals treatments. It is recommended to speak to a licensed medical professional if you feel the need to.
[] I understand that if I feel discomfort or have a problem with the session, it is my responsibility to speak up.
[] I understand that payment is required at the time of service, and I must give 24 hours notice of cancellation to avoid cancellation fee.
[] I understand that the above stamen is in regard to the service provided and I give permission for the healer to perform the service and that I have stated above all information I have disclosed is correct.
Privacy discloser: no information about the client will be shared or discussed with any third party outside JadeVictoriaFX. Without consent from the client.
By signing this, I acknowledge and agree with all the above information.
Client signature: Date: