

Client waiver, consent & acknowledgement from



∞ What is reiki?

Reiki is a natural energy form of healing that is channeled from the divine universal life-force energy. It is a wonderful relaxing treatment that allows the body to relax, to feel a sense of peace and connects your energy flow to the divine universal energy flow, so that the body can then be influenced to heal itself on emotional, spiritual and physical levels. Reiki is a safe method of healing and self-improvement.

∞ My Services.

Holistic therapy with reiki, energy reading, and listening skills.

Channeling and connecting to reiki energy enable's me to be guided to where the reiki healing is needed in the body, it allows me to read the energy as you heal, this can be physical pain, it can be emotional energy. Trapped energy caused by stress can cause many side effects within our bodies, and it can be feeding, if not causing, aches, pains, and dis-eases. After the reiki healing, I bring forward the therapy of talking about the reading and with the use of my listening skills, i will listen in a relaxed non-judgmental and confidential healing environment.

My services neither diagnose nor prescribe for disease conditions. All clients are encouraged to seek competent medical help when those services are deemed necessary. The client accepts total responsibilities for his/her health care and maintenance. Nothing said, typed, printed, or produced by me is intended or meant for diagnosis, or to take the place of a licensed medical profession.

∞ Underlying Health.

It is the client's / legal guardian's duty to inform Demi of any underlying health conditions that could cause any concern for close monitoring such as pacemaker, diabetes, heart conditions, or anything you feel is relevant.

CLIENT CONSENT

- I understand and have read all the above.
- I understand that Reiki is a natural energy form of relaxation. A simple, gentle, energy technique that is used for alleviating stress, pain management, stress reduction and deep relaxation.
- I understand that Reiki Practitioners do not diagnose conditions, nor do they prescribe or perform medical treatment of any licensed medical professional.
- I understand that Reiki energy complements any medical or psychological care I may be receiving.
- I also understand that the human body has the ability to heal itself, and to do so complete relaxation is beneficial.
- I acknowledge that long term imbalances within the body can require multiple sessions in order to facilitate the level of relaxation needed by the body to heal itself.
- I understand that in order to release blockages or imbalances of energy, this energy must surface in order to be released.
- I understand that the practitioner 'Demi' will be channeling energy to me for the duration of my reiki session/s.

∞ Privacy and confidentiality:

I am covered with data protection. I do not hold or share any of the client's personal details.

No information about my client will ever be discussed or shared with any third party without written consent. And would only be breached if there was concern of safeguarding measures.

∞ Viruses:

Hygiene/Cleaning is carefully undertaken before, throughout and noafter every session. I ask that if you are unwell, we rebook or we arrange distance reiki as an alternative.

Please be aware I am exempt from wearing a mask, so by signing this you are comfortable with proceeding to the face-to face sessions. For those that are vulnerable and would prefer, I offer Distance Reiki.

Question	Client section
Have you had reiki session before?	No
Do you have diabetes?	No
Do you have Heart arrhythmias? (pacemaker)	No
<p>Is there anything you would like to add about what you would like to accomplish through reiki therapy sessions?</p> <p>Aches / pain management? Mental health management?</p> <p>Emotion well-being? Relaxation?</p> <p>For soul growth? help sleep?</p> <p>Stress release? Anything else?</p>	

Date:

Name of client:

Client Signature:

Legal guardian for 18 years and younger:

As the child's legal guardian, you consent and are agreeing with all above on behalf of your child.

Name of guardian (18 years and younger):



Guardian signature: