## Divine Touch Intake Form

# A Christ-centered approach to energy medicine through hands-on healing

Name:	
Address:	
Cell Phone:	Is it ok to text?
Email:	
Have you ever experienced any ty (Please circle) YES or NO	ype of energy or hands on healing before?
If YES, what type?	Number of sessions:
Main reason for requesting Divine	e Touch:
	ormation:
Do you have a particular area of y	your body you would like to focus on?
	fragrances?
Are you sensitive to touch?	
Do you have a religious affiliation	?

A word, phrase or short description that describes your present spiritual

journey:\_\_\_

#### Are you interested in:

Divine Touch only with no opportunity for creative self-expression: Yes or No

Divine Touch and opportunity for creative self-expression to process feelings experienced during the session: Yes or No

### **Agreement of Consent & Waiver of Liability**

I understand that Divine Touch is a simple, gentle, hands-on energy technique that is used for stress reduction, relaxation, spiritual growth and healing. I understand that Divine Touch practitioners do not diagnose conditions nor do they prescribe or perform medical treatment, prescribe substances, nor interfere with the treatment of a licensed medical professional. I understand that Divine Touch does not take the place of medical care. It is recommended that I see a licensed physician or licensed health care professional for any physical or psychological ailment I may have. I understand that Divine Touch 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 heal itself.

I agree to take full responsibility for any risks, loss, claim, injury, damage or liability, known or unknown, which I might incur as a result of participating in this session. Divine Touch is not a substitute for medical attention, examination, diagnosis or treatment. Divine Touch is not recommended and is not safe under certain medical conditions. I affirm that I alone am responsible to decide whether to receive Divine Touch. I knowingly, voluntarily, and expressly agree to accept full responsibility and assume the risk for my use of or participation in any and all classes, activities, apparatus, appliance, facility privilege or service, of any nature, which is owned or operated by BODYful Connections, LLC. While engaging in any class or activity operated, organized, arranged or sponsored by BODYful Connections, LLC, either on or off their premises, I shall do so at my own risk, and hold BODYful Connections, LLC, its employees, representatives and agents, forever harmless from any and all loss, claim, injury, damage, or liability sustained or incurred by me. I specifically agree to indemnify and hold harmless BODYful Connections, LLC as to any loss, cost, claim, injury, damage or liability, sustained or incurred by participating in the classes, or through my use of the facilities or equipment of BODYful Connections, LLC which is caused by an act or omission, whether negligent, intentional or otherwise, of an employee, representative, or agent of BODYful Connections, LLC. I, my heirs, or legal representative forever release waive, discharge and covenant not to sue BODYful Connections, LLC for any injury or death caused by my participation in the Reiki session. My signature below constitutes my full acceptance of this waiver. I have read the release and waiver of liability and fully understand its consent. I voluntarily agree to the terms and conditions stated above.

Signed: \_\_\_

Date:

#### **Privacy Notice:**

No information about any client will be discussed or shared with any third party without written consent of the client or parent/guardian if the client is under 18.

To prepare for a Divine Touch Session please dress comfortablly and consider and prayerful intention you would like to focus on during the session.

