



Client Statement of Understanding and Agreement: Angel Readings, Energy Healing, Intuitive Coaching

I hereby attest that I am here on this and any subsequent visit, solely on my own behalf and not as an agent for any federal, provincial, municipal, or professional agency on a mission of entrapment or investigation.

I understand that Rebecca Loach is acting as an energy worker and intuitive consultant and that she is not licensed as a psychologist, psychotherapist, doctor of medicine or psychiatry or other health-care professional, and does not hold herself to be such. I understand spiritual healing is not a substitute for medical treatment and realize it is my responsibility to continue ongoing medical treatment and therapies until otherwise advised by my primary physician. The services performed are, at all times, restricted to helping me gain a better understanding of my level of health and spiritual wellbeing so that I will have a greater self-awareness and be able to use a self-care program.

All counsel, intuitive services, and energy clearing and visualizations are for the purpose of education, self-development, and general information. These sessions are in no way meant to replace medical advice from a licensed physician or any other health care practitioner.

I understand that I am fully responsible for the decisions and outcomes that arise from an Angel Reading, Energy Healing Session, or Intuitive Coaching Session, and I make these decisions in accordance with my own inner guidance and free will. I understand that it is my responsibility to decide if the recommendations and / or information presented are appropriate for my own life and health and that I should seek the advice of an appropriate licensed medical professional for any medical conditions or ailments that I have.

I understand that the recommendations, discussion, sale of nutritional supplements, botanicals, homeopathics, flower and gemstone essences, crystals, and essential oils pertain to the “whole body” energetic concept of health and nutrition and do not relate in the context of any specific ailment or condition.

I understand that the focus of our work together will remain within the scheduled appointment time. Minor follow up questions may be answered email, however more lengthy discussions, questions, or inquiries will require a new booked appointment or session. If I see Rebecca Loach in the community outside of our scheduled appointments, she will not let on about the nature of our work together, in order to protect my privacy and confidentiality. I understand that these in-person encounters are not a time to ask for in-depth questions or additional guidance and that all such conversations are to be conducted during a booked appointment.

Payment and Cancellation Policy

I agree to pay for services rendered prior to my scheduled appointment in order to reserve the time for me. I understand that there is a 24 hour cancellation policy and failure to notify Rebecca Loach within that time frame may result in a full charge for the appointment.



Refund Policy

I understand that, due to the nature of these services, all Angel Reading, Energy Healing Sessions, and Intuitive Coaching Sessions are non-refundable.

Privacy Statement

I understand that all the information which I provide is purely for the purpose of assessment and records and that no information will be disclosed to others or used in any other manner without my written permission, unless required by law.

In signing below, I consent to the terms and policies outlined in this document. I acknowledge that I am fully sovereign and in complete control of any and all life changing effects that may or may not occur through sessions and services with Rebecca Loach. I have read this document and I agree to accept full responsibility for my participation.

Name: _____

Full Address: _____

Phone Number: _____ Email Address: _____

I consent for email communication as it pertains to my work with Rebecca Loach

I choose to opt-in for Rebecca Loach's online newsletter.

Signature: _____ Date: _____