

## Earth Walk Medicine Informed Client Consent for Shamanic Healing Ceremony

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

The shamanic healing techniques utilized are imposed to encourage overall wellbeing and should not replace any mode of existing or suggested traditional medical treatment you may have been prescribed. Shamanic Healing is considered "Spiritual Healing" done with the assistance of the compassionate spirits called upon during ceremony. This is not a medical treatment. This is a mystical application and no remedies are prescribed or medical diagnosis made. No guaranties of improved wellbeing are made. The term "medicine" will be used often which is a Native American term meaning spiritual or mystical medicine, *not medication*.

Intuitive guidance may be part of your visit based on the circumstances of the visit and outcomes of the ceremony. All things said follow the essence of the mystical healing presented here. This is not a place for psychotherapy. Psychotherapy will be recommended when applicable or with situations where intentions to harm oneself or others is present.

During your session, you will be comfortably laying down on a massage-type table completely dressed. Plant medicine is used in the form of smoke (smudging), and in the form of quality essential oils to anoint spots here and there. If you are sensitive to these things, please advise Sandra at the beginning of your ceremony. During ceremony, you will be gently touched anywhere from head to toe. Certain shamanic tools may be gently laid upon you. Drums, rattles, and other sounds will occur at different intensities. The ceremony room is lit by unscented candles. For a short period of time, some work might be done in darkness.

It takes time to integrate the experience of shamanic healing, and to allow the benefits to unfold. Not all results are instantaneous.

**I have read the above information and understand what to expect.**

**(initial here)** \_\_\_\_\_

**Please read and initial each line below:**

1) I acknowledge there is no guarantee of improved wellbeing or cessation of discomfort.

**(Initial here)** \_\_\_\_\_

2) I agree this is a mystical application that is not intended as a medical treatment. It is not intended to replace any medical treatment I may be undergoing.

**(Initial here)** \_\_\_\_\_

3) I agree this is neither a medical clinic nor a facility that offers any form of physical or pharmaceutical therapy.

**(Initial here)** \_\_\_\_\_

4) I agree this is not a psychological treatment facility that offers counseling for mental disorders. Any Intuitive Guidance imposed is recognized as such in accordance with the mystical healing presented.

**(Initial here)** \_\_\_\_\_

5) I give permission to receive Shamanic Healing and/or Intuitive Guidance with no expiration of consent.

**(Initial here)** \_\_\_\_\_

6) Healing Touch Professional Association, the insurance company, requires Earth Walk Medicine/aka Reverend Shaman Sandra Chestnutt, to have clients sign this informed consent which includes: "Except in the case of gross negligence or malpractice, I or my representative(s) agree to fully release and hold harmless Earth Walk Medicine/aka Reverend Shaman Sandra Chestnutt from and against any and all claims or liability of whatsoever kind or nature arising out of or in connection with my session(s)."

I further release any other premises or locations where services may be rendered from any liability of personal damages as a result of receiving Shamanic Healing and/or Intuitive Guidance.

**(Initial here)** \_\_\_\_\_

**Print Name** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**(If under 21)**

**Print Parent/Guardian Name** \_\_\_\_\_

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_