



PLEASE NOTE THAT THIS FORM MUST BE SIGNED PRIOR TO YOUR 1ST APPOINTMENT

Reiki and Energy Healing - Informed Consent

I _____ consent to reiki and energy healing treatment for the following complaint(s): _____

The practitioner has provided me with information relevant to treatment for the above complaints. Alternative courses of treatment where applicable and relevant as well as the possible risks and side effects of my practitioner's proposed treatment plan, have been explained to me. The consequences of having treatment/not having treatment have been explained to me and I have been informed that I may stop treatment at anytime. At any given time throughout my treatment, I may request the practitioner to stop, modify or change the treatment plan.

I have read this information and understand this consent to massage treatment.

Patient Name: (Please print name): _____

Signature of Patient or Guardian: _____ Date: _____

Reiki and Energy Healing Practitioner (Print): _____ REHP Signature: _____

The vision of NatCan is to provide true integrative medical services. Given our commitment to this best-patient practice, we will communicate with your other medical providers at the clinic to ensure that you are receiving true complementary care. This will be done with respect for all privacy laws and any restrictive stipulation you may have placed on this communication. Please speak to your practitioner if you would like more clarification on this process.

I welcome professional dialogue regarding my case between members of my medical team at NatCan Integrative Medical & Wellness Centre: **Yes / No**

Signature: _____