



**Heather M. Hofmann**

Health and Wellness Consultant and Energy Work Practitioner

702-575-8263

### **Consent to Treatment and Liability Waiver**

I, \_\_\_\_\_, understand that energy work is not a substitute for professional medical or psychological treatment, diagnosis or care. Energy work practitioners do not diagnose conditions, perform medical treatments, prescribe substances, or interfere with the treatment of a licensed medical professional. If I choose to ingest or use any remedy or supplement (vitamins, minerals, herbs, compounds, or any external remedy of any kind) that may be recommended by Heather M. Hofmann, I do so at my own risk. It is recommended that I see a licensed healthcare professional for any physical or psychological ailment I may have, and inform them of any energy work and/or alternative wellness services I intend to receive. I understand that energy work may be used as a complement to any medical or psychological care I may be receiving.

**It is important not to have expectations about the outcome of receiving any energy work.** No claims will be made as to healing or recovery from any illness I may have, or the prevention of any illness I could potentially have in the future. Energy work modalities are often holistic in nature, and therefore, can facilitate healing mentally, emotionally, spiritually, and/or physically. Energy work seeks to promote harmony and balance within the energy field, supporting the body's natural ability to heal itself; however, I understand that results are not guaranteed. I acknowledge that long term imbalances in the body sometimes require multiple sessions in order to facilitate noticeable healing.

**Energy work is generally a safe method of treatment, but shifts in energy can occur.** These shifts may create some side effects mentally, emotionally, spiritually, and/or physically, which may include things such as: physical tingling, feeling "lighter," fatigue, nausea, headaches, muscle soreness, thirst, emotional sensitivities, a need for extra sleep, vivid dreams, changes in relationships, shifts in perception, etc. I do not expect Heather M. Hofmann to be able to anticipate all possible risks, complications or side effects of energy treatments, though I do expect her to exercise her best judgment based upon facts then known for my best interest and highest good.

**I acknowledge that, although Heather M. Hofmann has a Master's Degree in Education and has been trained and certified in several energy work modalities, she is not a psychologist, psychotherapist, physician, or other licensed health care professional.** Any information disseminated or taught is done in good faith. The accuracy, validity, effectiveness, completeness, or usefulness of any information cannot be guaranteed. I am responsible for my own learning, health and well-being. I will use discretion in using and applying information and energy techniques I am taught and am responsible for all outcomes incurred while doing so. Heather M. Hofmann is in no way responsible or liable whatsoever for the use or misuse of the information taught or shared.

**Except in the case of gross negligence or malpractice, I or my representative(s) agree to fully release and hold harmless Heather M. Hofmann and *Healing in Homes LLC* from and against any and all claims or liability of whatsoever kind or nature arising out of or in connection with my session(s).**

The Kansas Board of Healing Arts does not license or regulate the practice of energy work practitioners. Since *Healing in Homes LLC* is based out of Kansas, Heather M. Hofmann is not licensed, certified, or registered in any other state or country. Because laws, licensing, and legislation vary from state to state, **it is required that I grant permission in writing if I choose to participate in any energy work modality involving touch.** Any “hands-on” touch will be a light touch, on a body fully clothed, and never sexual in nature.

*Note: Touch is not required for energy work treatments to be effective. Not granting permission to touch does not exclude anyone from any healing modality, as energy work can be done in the energy field itself, by proxy, or distantly.*

I voluntarily sign below, signifying that I have read the above-mentioned material and give consent to be treated. I intend this consent form to cover the entire course of my energy treatments for my present condition and for any future conditions(s) for which I seek any energy healing modalities.

**Client Name (Please Print):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Client Signature:** \_\_\_\_\_

- I give permission for Heather M. Hofmann to do “hands-on” energy work for me.
- I prefer not to be touched.

**Dependent Children and Pets**

I give permission for Heather M. Hofmann to treat the following **dependent children or pets.**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship / Animal: \_\_\_\_\_

- Permission for “hands-on” energy work
- Prefer no touch

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship / Animal: \_\_\_\_\_

- Permission for “hands-on” energy work
- Prefer no touch

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship / Animal: \_\_\_\_\_

- Permission for “hands-on” energy work
- Prefer no touch

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship / Animal: \_\_\_\_\_

- Permission for “hands-on” energy work
- Prefer no touch

