

PLEASE READ CAREFULLY

Foot Reflexology Disclaimers and Liability Waiver

You Need to Know That:

1. I am not a doctor.
2. I do not practice medicine.
3. I do not diagnose or treat for a specific illness.
4. I do not prescribe or adjust medication.
5. Reflexology is not a substitute for medical treatment, but is a complement to most types of therapy.

What Is Reflexology?

Reflexology is an ancient, manual technique based upon the concept that the entire body is reflected as a system of reflexes on the feet (hands and ears as well). By pressing on these reflexes with fingers, one is able to bring about relaxation and balance in the body, and also assist in overall stress reduction and enhancement of well-being.

What Does Reflexology Do?

Studies show that:

1. Reflexology promotes balance and normalization of the body naturally.
2. Reflexology reduces stress and brings about relaxation.
3. Reflexology stimulates circulation and the delivery of oxygen and nutrients to the cells.

By signing this form, I certify that the above information is correct to the best of my knowledge. I give my consent to a Reflexology session. I understand that I may discontinue a session or sessions at any time for any reason, and if I feel at all uncomfortable I should tell my ILS practitioner.

If I have been diagnosed by a licensed health professional as having any disease, injury or other physical or mental condition, I understand that I should inform the person who made that diagnosis about the reflexology session I am receiving. If I have any communicable condition or condition that may contaminate the therapy area, I may be refused service until such time as that condition is certified as cleared.

I understand that this reflexology session should not be construed as a substitute for medical treatment and that I should see a physician, chiropractor or other qualified medical specialist for any mental or physical ailment. I fully understand that the ILS therapist conducting this session is not an allopathic doctor, psychologist, or psychiatrist and does not portray himself/herself to be. I agree to keep the ILS practitioner updated as to any changes in my medical profile prior to any future sessions and understand that there shall be no liability on the therapist's part nor on the part of Integrative Life Solutions, Inc. or its affiliates should I fail to do so.

I understand that I will be liable for payment of the scheduled appointment. The therapist also reserves the right to refuse service to anyone for any reason.

By signing below I acknowledge that I have read and understand all parts of this consent/intake form and that I have had the opportunity to ask any questions with regard to any services or therapies offered.

All client information is confidential.

Print Name _____

Signature _____

Today's Date _____

Name of Therapist Chris Niedt, Ivy Counseling Group

General Wellness and Medical History

How would you rate the current state of your health? Please circle one.

Excellent Good Fair Poor

Are you currently under the care of a physician?

Yes / No

If yes, please explain:

For women, are you currently pregnant? Please circle one.

Yes / No

If yes, how far along? _____

Please list any other therapies, besides conventional medicine or chiropractic medicine, that you currently use in the space below.

Are you currently taking any medications?

Yes / No

If yes, please list in the space below.

List any major illnesses, accidents, surgeries, or broken bones, especially in the legs or feet in the space below.

Do you currently have athlete's foot or any other communicable condition on your feet?

Yes / No

If yes, please explain in the space below.

Do you have any broken skin, rashes, wounds or another condition not otherwise specified on your lower legs or feet?

Yes / No

If yes, please explain.

Do you have any vascular/vein or nerve/muscle/tendon issues with your lower legs or feet (such as varicose veins, peripheral neuropathy, etc)?

Yes / No

If yes, please explain in the space below.

Please list the place(s) where tension is most evident in your body.

Have you experienced Reflexology before?

Yes / No

If so, when?

Do you have any specific goals for today's session?