**REIKI INTAKE FORM**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Referred By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency contact & phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you currently under the care of a doctor?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If so, for what condition(s)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever received Reiki? Yes\_\_\_\_ No\_\_\_\_

If yes, when was your last session?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you sensitive to touch? Yes\_\_\_\_ No\_\_\_\_

Are essential oils ok to use? Yes\_\_\_\_ No\_\_\_\_

Reason for session:

\_\_\_\_ Relaxation / Stress Reduction

\_\_\_\_ Specific Issue:

Physical: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emotional: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mental: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spiritual: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**WHAT TO EXPECT**

A typical session begins with a brief introduction where you can discuss any thoughts or concerns, followed by the client laying down on a massage table, fully clothed. Relaxing music is played, and the client is guided through a short meditation. I make every effort to be sure that each client feels safe and comfortable. Reiki is channeled through my hands to you, through light touch with my hands placed on or near your body. Reiki creates a state of deep relaxation, which promotes healing by working with your life force energy to help restore the flow of balance on all levels: mind, body, and spirit. You should feel relaxed, and you can choose to meditate or nap. You may feel a variety of sensations including warmth, tingling, or pulsing, or you may not feel anything. Each person responds uniquely, and the energy flows and heals, regardless of what you feel during the session. Energy medicine has a cumulative effect so when you treat yourself to regular sessions, better health and well-being are natural outcomes. At the end, we can discuss anything that came up for you during the session. After the session, you may feel the energy continuing to flow. Common experiences include peacefulness and a heightened sense of well-being. Depending on what has been cleared or healed during the session, you may also feel heightened emotions or tired.

**TREATMENT CONSENT FORM**

I understand that Natasha Bacca does not diagnose illness, disease, or mental disorder, nor does she prescribe medical treatment or pharmaceuticals. I understand that energy healing is not a substitute for medical examination or diagnosis, and that it is recommended that I see a MD/ND for any physical or mental ailment. With this in mind, I agree that Natasha Bacca cannot be held liable for any problems that might arise that I think could be attributed to the energy healing session. I have stated all of my known medical conditions and if necessary I will keep updated on my physical, mental, and emotional health. I attest that I understand the nature of the treatment and freely elect to receive treatments. I release Natasha Bacca from any and all claims of malpractice, non-disclosure, or lack of informed consent.

Printed Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_