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I, _____, the undersigned, understand that Reiki Healing sessions are for the purpose of reducing stress and increasing relaxation. I understand that Reiki is not a form of massage, and that the only articles of dress that I remove are my shoes and constricting items such as belts. I may choose to cover with a blanket if I so desire. I also understand that a Reiki Healing session is not a substitute for medical or psychological diagnosis and/or treatment. A Reiki Healing Practitioner does not diagnose conditions, does not perform any medical treatment, does not prescribe substances, nor interferes with the treatment of any licensed medical professional. It is recommended that I see a licensed physician or licensed health care professional for any physical or psychological ailment that I have.

Signature: _____ Date: _____

Name: _____

Address: _____

City: _____ State: _____ Zip Code _____

Email Address: _____

Phone: _____ Date of Birth _____

How did you find me? (referral, internet, etc.) _____

Please briefly describe your reason for coming for Reiki today.
