

Release and Waiver for Energy Healing/Balancing and Reiki

I acknowledge that Nikoletta Voulgaris is a Reiki Practitioner, and is in private practice for the purpose of providing mental/emotional/physical and spiritual support using Energy Healing Techniques and Reiki.

I also acknowledge that Nikoletta Voulgaris is not a medical doctor or mental health care professional, and accordingly cannot and will not provide me with medical advice or psychological advice. I will rely on my own medical practitioner or mental health professional for advise for medical or psychological advice. I will rely on Ms. Voulgaris only for the sharing of important skills and tools involved in increasing my mental/emotional/physical and spiritual awareness through the transfer of loving and compassionate energy.

Ms. Voulgaris is a support person who has spent many years of personal study in the area of Energy Healing/Balancing, Reiki, meditation and inner processing. She will respond to my inquiries by providing positive reinforcement and appropriate feedback. I acknowledge my overall responsibility to advise Ms. Voulgaris with respect to my levels of comfort or discomfort and any other information, which might influence her support of me.

I recognize that Energy Healing/Balancing and Reiki are only two factors in the management of my health. I also recognize that ultimately it is up to me as to whether I choose to follow the sharing of information and skills provided by Ms. Voulgaris and that it may be advisable to consult with my medical or mental health professional prior to so doing.

In consideration of the services, information, and support I have received or will hereafter receive from Ms. Voulgaris, I hereby hold harmless Ms. Voulgaris from any or all liability in consequence of such services, information and support given, and release and waive all claim for damage howsoever incurred or to be incurred, as a result of such services, information and support. This Release shall be effective and binding upon my heirs, next of kin, executors, administrators and assigns.

I have read this Release prior to signing and I understand its effect. I am aware that by signing this Release I am waiving certain legal rights, which I or my heirs, next of kin, executors, administrators and assigns may otherwise have had against Releasees.

Signed on this ____ day of _____, 20____ .

Client (Print)

Client (Signature)

Nikoletta Voulgaris