

Mini Intuitive Guidance / Reading and/or Energy Healing Intake Form

Name (Please Print): _____

Date of Birth: _____ Time of Birth: _____

Address: _____

Email: _____

Home Phone: _____ Cell Phone: _____

Were you referred (circle one): Yes No Referred by: _____

Previous Reading Information:

- 1. Have you ever received any type of Intuitive / Psychic or Intuitive Art Session? (Circle One) Yes No
- 2. Have you ever received any type of Energetic Healing? (Circle One) Yes No
- 3. Please select the types of traditional or alternative mental health therapies.

- Intuitive Psychic Reiki
- Psychic /Intuitive Intuitive Art IET
- Oracle Card Tarot Card Other _____

4. How often were your readings? _____ times per WEEK _____ times per MONTH
_____ Other (explain) _____

5. When was your last session and type? _____

6. What was your experience during the session (if applicable) _____

7. What are you looking for or your expectations for your session today? _____

Statement of Practice and What You Need to Know:

You understand that Cynthia Curley, Deborah A. Mueller, Erich Mueller, and other associates as listed on the Christa Healing and Wellness Center, Inc. website or listed as visiting practitioners are practitioners and are NOT doctors and DO NOT practice medicine. You understand that Intuitive guidance / coaching (counseling), and Energy work are not therapy, psychiatry, or psychology. You understand that Intuitive guidance / coaching (counseling) is intended to advise and facilitate your own healing processes, life improvements and enhancement. You understand that Intuitive Practitioners / Coaches (counselors) do not diagnose conditions or provide insight or treat any specific illness(es). You understand that Intuitive Practitioners / Coaches (counselors) do not prescribe or adjust medication and will not provide insight or suggestions for medications or supplements. You understand that Intuitive Practitioners / Coaches (counselors) will not interfere with the treatment of a licensed medical professional. No medical diagnosis or medical treatment will be given. You understand that Intuitive Guidance / Coaching (counseling) Sessions do not take the place of medical care. It is recommended that you see a licensed physician or licensed health care professional for any physical or psychological ailment you may have. You understand that holistic and metaphysical, Intuitive Guidance / Coaching (counseling), other Intuitive services and energy work approaches can complement the medical or psychological care you may be receiving. You also understand that the body has the ability to heal itself and to do so, complete relaxation is often beneficial. You acknowledge that long term life and health issues sometimes require multiple sessions, combined with you own efforts in order to create meaningful changes. You understand that decisions are not made for you and that you are consenting to these services.

DISCLAIMER: Information you receive from any and all services, communication or consultations with Christa Healing and Wellness Center, Inc, Cynthia Curley, Deborah A Mueller, and/or Erich Mueller is for personal, educational or entertainment purposes only and is not intended to, nor should it ever, take the place of any medical, legal, financial, traditional psychological, or other professional advice. Christa Healing and Wellness Center, Inc. and its above noted affiliates will not accept responsibility for any decisions made or actions taken by anyone based upon services, consultations or communications received. The choices you make and the actions you take are solely your responsibility. You agree to completely hold blameless and absolutely indemnify Christa Healing and Wellness Center, Inc. or any persons associated with Christa Healing and Wellness Center, Inc., from any and all liabilities and expenses.

Client Signature: _____

Date: _____