

EFT/Tapping/Energy Psychology

Consent Form

Candice Brunlinger, EFT Practitioner
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Read, initial, date, and sign before our session

Disclaimer

I understand that any information Candice Brunlinger provides is only general information and should not be considered medical or legal advice. I understand that in the session, we will use techniques that address the body's emotional components and energy systems. These methods include but are not limited to EFT or Emotional Freedom Techniques. While increasing amounts of research show the effectiveness of these techniques, EFT has yet to be accepted as a mainstream method and, therefore, is considered experimental.

Due to the experimental nature of EFT, I agree to assume and accept full responsibility for any risks associated with utilizing EFT both in and out of a session with Candice Brunlinger. EFT is not intended to diagnose, treat, cure, or prevent any disease or psychological disorder. Neither EFT nor any other energy-based technique that may be used in the session is intended as a substitute for medical or psychological treatment. Any stories or testimonials about EFT are not to be considered a warranty, guarantee, or prediction regarding any outcome of any individual using EFT. I understand that Candice Brunlinger is in her mentorship for EFT Certification in the State of California and is a certified herbalist, health coach, mindfulness practitioner, Tai Chi, and Qigong instructor. Candice Brunlinger is providing these methods in a non-licensed coaching capacity and accepts no responsibility or liability whatsoever for using or misusing the information or techniques presented.

I understand that I am strongly advised to seek professional advice as appropriate before making any health-related decisions. If I am on any medications, I understand that I am NOT to change any dosages and should consult my physician or the professional who prescribed my medications.

Informed Consent

Emotional Freedom Techniques, or EFT, is based upon the belief that negative emotions are caused by a disturbance in the body's energy systems. EFT and other similar methods address the energy system and are intended to decrease the impact of negative emotions on the body. Energy methods are intended to complement, not replace, medical or psychological care.

Because these methods are relatively new, the extent and breadth of their effectiveness, including risks and benefits, have yet to be fully known. While scientific studies are mounting evidence of the clinical significance of providing positive outcomes, each person responds differently, and results vary from person to person.

Print your name below, acknowledging you have read and been advised of the following: Then initial and sign in the prompted sections.

I,

(Print/Type Full Name)

understand the following:

- Candice Brunlinger is not a licensed therapist, doctor, psychologist, or psychotherapist. She will not be treating or diagnosing any disease or illness.
- EFT is a self-applied tool that helps reduce the physiological stress response and restore our energy systems. When we reprogram how the brain perceives a situation, we can feel differently about it. Studies show that EFT practices help to reprogram our beliefs, decrease stress hormones, increase beneficial hormones and neurotransmitters, elevate mood, and more.
- I recognize that these tools restore my body's ability to heal, and Candice Brunlinger's role as a practitioner is to create the space and provide the tools for this to occur.
- Unanticipated reactions, such as intense emotional or physical sensations or additional unresolved memories, may surface during a session. I will communicate what comes up with Candice so she can best support me and help me feel safe and resourced to honor whatever comes up during the session.
- Emotions, sensations, thoughts, and memories may also surface after a session and indicate other incidents that could be addressed. I will take note of and use my self-care practices and general tapping to support me. If needed, I will bring this information into my next session to explore it further.

- I agree not to change or discontinue any medications I am taking while working with Candice Brunlinger unless consulting and working with my physician, psychiatrist, and/or primary care provider.
- I understand that Candice Brunlinger may refer me to other practitioners with specific skills to assist with areas beyond her scope of practice.
- Even with the benefits of EFT, there are no claims or promises about what I will experience. Every person will have a different experience using EFT or any energy healing modality, and my experience will also vary from session to session.
- Although most sessions result in a positive shift, there may be sessions where I do not experience any changes in how I feel. There may be times when I feel worse or overwhelmed during or after our sessions. I am responsible for communicating with Candice Brunlinger any shifts in emotions, thoughts, or experiences during or between sessions and using the practices she provides to self-regulate as needed.
- In the context of in-person sessions, I understand that gentle touch may be used, with my permission, for therapeutic application.
- Except in the case of gross negligence or malpractice, my representative(s) or I agree to fully release and hold Candice Brunlinger harmless from and against all claims or liability arising from or in connection with my sessions. If there are any questionable practices, I will attempt to resolve them with Candice Brunlinger first.

Please Initial:

Confidentiality Agreement

- I understand that all information I share with Candice Brunlinger is confidential and that no information will be released to a third party without my consent, with the following 3 exceptions:
 - 1) When there is a risk of imminent danger to me or another person.
 - 2) When there is suspicion that a child or elder is being sexually or physically abused or is at risk of such abuse.
 - 3) When a valid court order is issued for session records. (There will be additional hourly fees for time to prepare and attend court)

- I give Candice Brunlinger permission to discuss my case with her mentors and advisors and/or a healthcare provider as needed.
- For Candice Brunlinger’s supervision and/or teaching, disguised case studies may be shared in those contexts. Your name and other identifying information will be modified to protect your confidentiality in these situations.
- To protect your privacy, all records will be kept in a safe location for 7 years and properly disposed of after that time.

Please Initial:

Scheduling/Cancelation/Fees

- I understand that Candice Brunlinger has a 24-hour cancellation policy and agrees to pay for any booked sessions not canceled 24 hours in advance. If another session time is available, my appointment may be rescheduled for an additional fee.
- I can terminate future sessions at any time for any reason. Candice Brunlinger, as a practitioner, can terminate future sessions if she feels they will not continue to be in my best interest, if support is beyond her scope of practice, and/or if there is any conflict of interest. Cancelation policies will be considered in either scenario.
- I understand that Candice Brunlinger offers other services and products besides EFT. I can inquire about any of these services outside the context of our EFT sessions. I can schedule additional appointments and purchase other offerings from her website at www.herballivingandhealing.com; however, there is no expectation to do so.
- Fees and services are subject to change.

Please Initial:

I have read and thoroughly considered all the above and have obtained whatever additional input and/or professional advice I deem necessary or appropriate to make an informed decision before commencing sessions utilizing EFT.

By signing this, I consent to being 18 years or older and to using EFT and other energy-based modalities in my sessions. I waive all liability and expectations and will communicate anything relevant to our sessions. All information, resources, and communication provided by Candice Brunlinger are for educational purposes only and are not to replace or negate any professional medical advice, treatment, or diagnosis.

I agree to take complete responsibility for my health and commit to sharing any discomforts or questions I have as soon as possible while working with Candice Brunlinger. I will be learning personal self-care with my energy. I choose to participate in energy therapy of my own free will and know I have the right to cease using these methods at any time.

My signature acknowledges my choice to consent to my practitioner's new and innovative approaches to energy therapy. My consent is free from pressure or influence from any person or group.

[If you have any questions or concerns about anything you agree to, please email me, and we can discuss it further.]

Typing in my name below is the electronic equivalent of my actual signature.

Name Printed/Typed:

Client Signature:

Date: