

THE LENAIR HEALING CENTER
RHONDA LENAIR
Medical Intuitive
QUALIFYING TELEPHONE CONSULTATION AGREEMENT

I, _____, (the "Client") understand that Rhonda Lenair, practitioner of her proprietary method:

- is a medical intuitive self-trained in bioelectrical and electromagnetic concepts. She comprehends and reiterates a person's bioelectrical system and status as it relates to their health (in person or remotely over the telephone), energetically;
- is not an allopathic Medical Doctor and does not practice medicine; and
- has not presented herself as a practitioner of allopathic medicine, naturopathic medicine nor as a certified alcohol and drug counselor.

By my signature below, I acknowledge that Ms. Lenair is not practicing allopathic medicine, nor has Ms. Lenair presented herself as possessing any specific or formal training, experience or license in allopathic or naturopathic medicine or any of its branches.

I seek Ms. Lenair's assistance and consultation to help me improve my health through bioelectrical and electromagnetic consultation. In doing so, I acknowledge that I am aware of, understand and agree to the following points:

1. Ms. Lenair's recommendations are informational in nature, designed only to help me achieve bioelectrical stability, balance, and harmony. They are not intended to treat, prevent, diagnose, mitigate, or cure any illness or disease. Likewise, any foods, herbs, botanicals, or nutritional supplements she may recommend are for educational, not medicinal or curative, purposes.
2. I seek Ms. Lenair's consultation freely and of my own accord, without coercion and with full knowledge of the limitations of the services that Ms. Lenair offers. I take full responsibility for seeking appropriate health care for myself. I am advised that if I have any symptoms or illness, it is my responsibility to put myself in the care of a trained medical practitioner of my choice. Likewise, if I am pregnant, nursing or consenting to the evaluation of a child, I am advised to consult with a trained medical practitioner before taking or giving nutritional supplements or implementing any other suggestions.
3. During the course of any session, my system may produce metaphors or 'Poemantras™' (poetic verse). I understand that these writings are copyright material of The Lenair Healing Center and may be used in accordance with copyright law; however, The Lenair Healing Center will not use any of these materials for any purpose if the material in any way references my name or likeness, or it can be inferred through these writings that they are about me, unless I provide specific written permission for it to be used. Likewise, I will not use these materials without properly acknowledging and attributing its source.
4. Neither Ms. Lenair, The Lenair Healing Center, Inc., The Lenair Healing Foundation, Inc. nor any of its employees or volunteers offers any promises, warranties, assurances of the success or the outcome of any recommendations. I agree to hold Ms. Lenair, The Lenair Healing Center, Inc., The Lenair Healing Foundation, Inc., and its employees and volunteers free and harmless from any claims, demands or suits for damages for any injury or complication whatever that may result from such recommendations, and from any adverse reaction I may have to any recommended nutritional supplement or food.
5. I understand that fees for the consultation are non-refundable. If I must rearrange this qualifying consultation, I am advised that a minimum 48-hour notice is required to avoid forfeiting the fee. I also agree not to tape the telephone consultation without express permission.

By signing this agreement, I acknowledge that I have read and understand its contents.

Signature of Client or Person Authorized to Consent

Date

Signature

Relationship to Client