

Anne B. Rice, MA, BMP, HP, CACH, ASW
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INFORMED CONSENT

Dear Participant,

Due to the current state of our medical legal system, it is important that you read, understand and sign this consent form.

I _____ acknowledge that Anne B. Rice is not responsible for any medical diagnosis, treatment or psychological wellbeing. I understand that the medical profession does not necessarily recognize or understand Heart-centered session work, guided meditations, energy work, and discussions". Therefore, I will continue to see my regular doctor or counselor, and all medical or psychological decisions will be made explicitly between my health professional and myself. I understand that I am fully responsible for communicating with Anne B. Rice regarding any special health needs, issues or concerns, psychologically or physically that may be sensitive to change. I understand that "Heart-centered session work, discussions, teachings, meditations and workshops" will uncover hidden issues in myself, which may lead to some discomfort and disruption, as changes are integrating into my life. I accept this change and still choose to participate in this form of session work, energy work, teaching, guided meditations and/or healing workshops. I further understand that no results have been implied or guaranteed to me personally by Anne B. Rice.

Anne Rice's education includes a Masters of Divinity, Masters in Counseling Psychotherapy, Body Mind Psychotherapy, Transpersonal Hypnosis, Advanced Conscious Healing (includes Energy Work) and ten years in Pathwork Mentoring. She has maintained a private practice for 27 years which is comprised of session work, workshops and retreats with individuals, couples and groups. Sessions, retreats and workshops may include meditation and prayer, movement and emotional release, teachings, spiritual guidance and intuitive reads, exploration of family dynamics, ancestral patterns, soul level healing and energy work. Anne does not do hands-on healing or body work.

Signing this form is an agreement to a 24 hour cancellation policy and payment in full for missed sessions, except in the case of emergencies. Session payments are to be paid at the time of the session or beforehand. Workshops require a deposit in advance with the remainder paid in full by the first day of the workshop.

If participating in session work or workshops/retreat with Anne B. Rice, I have been duly informed that personal issues will be revealed in myself. I understand that I AM FULLY RESPONSIBLE for myself at all times and if I am unwilling to confront my issue, I must choose to say NO, otherwise a YES to revelation and healing will be inferred. I, Anne B. Rice, will try to be sensitive and aware of each person's needs, yet I cannot take responsibility for each person's choices.

I certify that to the best of my knowledge, I do not have any medical or psychological condition or any physical issues, which would prohibit me from participating in healing sessions, workshops, or doing guided meditations. If using any medication, or if I have any medical or psychological condition, I will notify Anne in writing on page 2 of this form.

Please check here if you are writing on page 2 of this form_____

Being 100% responsible for myself, I am open to receive and benefit in all ways from "Heart-centered session work, guided meditations, energy work, teachings and discussions" with Anne B. Rice. Except in the case of gross negligence or malpractice, I or my representative(s) agree to fully release and hold harmless Anne B. Rice from and against any and all claims or liability of whatsoever kind or nature arising out of or in connection with my session(s) and workshops.

Participant_____

Date_____

Witness or Guardian_____

Date_____