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| Name |  |
| Phone |  |

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| Email |  |

I understand that Alignment Activation Sessions may include the following:

1. Guided Meditation
2. DNA Activation
3. Lifestyle coaching
4. Holistic Nutrition counseling/education
5. Spiritual Guidance
6. Distance energy work
7. Channeled Messages from Prime Creator

I understand that I am taking **personal responsibility** for my spiritual journey and anything that happens in my life as a result (directly or indirectly) of this session is my responsibility. I understand that hidden issues of my life may come to the surface and if I do not currently have the support to deal with them, I will ask for help from someone who can give me qualified assistance. I agree to inform Susie of any concerns I have about this session before we schedule.

I accept any other modality used in my session/s and agree to release Susie Beiler and Spectrum Health Consulting LLC from any liability associated with Alignment Activation Sessions.

I agree to the terms above.

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| Signature |  |

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| --- | --- |
| Date |  |