



INTENTION WAIVER:

I appreciate the opportunity to discuss your problems and concerns. I wish to make it clear that our intent is not to diagnose or prescribe, but to offer recommendations and information to help you establish a healthy order in your daily life. If you seek medical advice, please consult a medical practitioner. If you are seeking ways to take responsibility for your own health and well-being, I am happy to be of assistance.

I understand and agree with the Intention of my Inner Source Living session.

Signature: _____ Date: _____

Witness: _____ Date: _____