

Release and Waiver

I acknowledge that Rozlyn Warren, CHt, ESLC is an Intuitive Energy Healer, and is in private practice for the purpose of providing mental/emotional/physical and spiritual support using Intuitive Energy Healing Techniques.

I also acknowledge that Rozlyn Warren, CHt, ESLC is not a medical doctor or mental health care professional, and accordingly cannot and will not provide me with medical advice or psychological advice. I will rely on my own medical practitioner or mental health professional for advice for medical or psychological advice. I will rely on Rozlyn Warren, CHt, ESLC only for the sharing of important skills and tools involved in increasing my mental/emotional/physical and spiritual awareness through the transfer of loving and compassionate energy.

Rozlyn Warren, CHt, ESLC is a support person who has spent many years of personal study in the area of Energy Healing, Empowered Spiritual Life Coaching, Hypnotherapy, meditation and inner processing. She will respond to my inquiries by providing positive reinforcement and appropriate feedback. I acknowledge my overall responsibility to advise Rozlyn Warren, CHt, ESLC with respect to my levels of comfort or discomfort and any other information, which might influence her support of me, including physical and/or mental conditions.

I recognize that Energy Healing is only one factor in the management of my health. I also recognize that ultimately it is up to me as to whether I choose to follow the sharing of information and skills provided by Rozlyn Warren, CHt, ESLC and that it may be advisable to consult with my medical or mental health professional prior to doing so.

The Soul Guidance and Sacred Mentoring™ Templates are powerful energetic processes. If I am under TREATMENT for any mental conditions, including depression, I will alert both Rozlyn Warren, CHt, ESLC and my health care provider before participating in a SGSM™ Template Session.

In consideration of the services, information, and support I have received or will hereafter receive from Rozlyn Warren, CHt, ESLC, I hereby hold harmless Rozlyn Warren, CHt, ESLC from any or all liability in consequence of such services, information and support given, and release and waive all claim for damage howsoever incurred or to be incurred, as a result of such services, information and support. This Release shall be effective and binding upon my heirs, next of kin, executors, administrators and assigns.

I have read this Release prior to agreeing and I understand its effect. I am aware that by agreeing to this Release I am waiving certain legal rights, which I or my heirs, next of kin, executors, administrators and assigns may otherwise have had against Rozlyn Warren, CHt, ESLC.

By marking the box on the registration page and working with Rozlyn Warren, CHt, ESLC, I am indicating my agreement and acceptance of this Release and Waiver.