

GENERAL CONSENT FORM & LIABILITY CLAIM

For Individual Sessions and/or groups in person or Online, with Adima Martha and/or Sudeva Hawkes

Please put your full name, address and signature. Send a scan or photo back to us by email

Name*	
Address*	
Email*	
Phone	

I agree to the terms and conditions hereunder. Additionally I can find related information at:
<https://adimasudeva.com/en/readwatchlisten/downloads>. Legal Info: <https://adimasudeva.com/en-au/legal-info>.
Privacy Policy: <https://adimasudeva.com/en-au/privacy-policy>

REGARDING ONLINE SESSIONS and COURSES

Online Sessions require functioning AUDIO and VIDEO equipment on your computer (Zoom, Skype) and a strong enough reception to perform. The client must participate in sessions while alone in a room, indoors and to switch on the camera. If sessions cannot happen due to technical failures longer than a few minutes, LightPath AdimaSudeva will reschedule the appointment once.

REGARDING ALL SESSIONS or COURSES/CLASSES

PAYMENT & COMMITMENT

Payment needs to be in advance. Should transfers be later than 48 hrs before appointment we ask for a note with a proof by email. There is no rebate. We can offer a reduced fee, when a client can document real financial difficulties. With the talk therapy we usually ask a commitment to at least 4 sessions within 8 weeks, with body work we will make suggestions.

CANCELLATION

is free up until 48 hours before. For cancellation within 48hrs before appointment the fee is 33% of the value of the booking. This does NOT apply when a valid reason (emergency or illness) is documented AND the appointment is re-scheduled as soon as possible. **For cancellation/no show without warning, the full price is due.**

CONSENT

I am participating voluntarily. I understand that talk therapy and-or body/energy work with Adima Martha Hawkes and Sudeva Hawkes is not a substitute for medical advice or medication. I understand that I may experience changes in my body, psyche and emotions. During participation I take responsibility for myself and my actions and for any damage I do to myself, to others or to property. I am physically and mentally healthy and/or will inform the therapists about current and previous diagnosis/symptoms. In case of medical diagnosis I will provide documentation if required by the therapists. I release the above named therapists from any claim for liability.

.....
Location. / Date

Signature

Bank in Australia: ING Sudeva and/or Martha Hawkes BSB 923100 ACC 67179401

Bank International WISE Account for EUR

Account Owner: Martha Brigitte Hawkes (*full legal name is necessary*)

IBAN: BE29 967186890064 BIC: TRWIBEB1XXX

PayPal: info(at)adimasudeva.com (fees and currency exchange into AUD)