

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

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|-----------------|--|
| Name* | |
| Address* | |
| Email* | |
| Phone | |

General Consent and Liability Claim for Individual Sessions and/or groups in person or Online, with LightPath AdimaSudeva (Adima Martha Hawkes and/or Sudeva Hawkes)

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

ONLINE WORK

Online Sessions and Courses 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. For technical failures on the participant's side during group classes there will be no refund.

ALL SESSIONS or COURSES/CLASSES

PAYMENT & COMMITMENT

Payment needs to be in advance. Should transfers be later than 48 hrs before session 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 6 weeks, with body work we will make sensible 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 a.s.a.p. **For cancellation/no show without warning, the full price is due.**

COVID-19

When you notice ANY kind of flu or cold symptoms, please re-schedule your appointment. We STRONGLY ADVISE NOT to participate in body or energy work (sessions and groups) within 4 weeks after vaccination, in order to exclude possible influence on the normal process of the vaccine or any unwanted side effects caused by the effect of the Pulsing work. Within 3 weeks after, if you insist, we will ask you for an additional signature.

CONSENT

I am participating voluntarily. I agree with the above and 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 and prescribed or other drugs/usage of substances. 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.

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Location / Date

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Signature