



hyaline healing

Reiki healing in Riverside

STATE OF CALIFORNIA REQUIRED DISCLOSURE

California law requires the following to be disclosed to you for alternative healing services that are not licensed by the state:

I, **Hannah Chu**, am an alternative healing arts practitioner.

1. I am not a California licensed mental health practitioner or licensed physician.
2. Treatment I provide is alternative and/or complementary to healing arts services licensed by the state of California.
3. The state of California does not license or in any way approve the services I provide, nor does it require the services I provide to be licensed or approved.
4. The state does require that I disclose to you the nature of the treatments I provide, the theory upon which treatment is based, and to tell you my training, experience, and qualifications regarding providing this treatment.

Hannah's qualifications include Reiki I, II, and Teaching Master levels III and IV from the Southern California College of Energy Healing in Upland, California. Additionally, Hannah has been a Reiki practitioner for over 4 years with over 200 hours of healing sessions.

The service provided by Hannah Chu is energy healing. Energy healing is based on Eastern medicine, Japanese Reiki healing, and other energy healing methods.

By signing below, I acknowledge that:

1. I have read the above disclaimer and I am choosing to receive treatments/sessions from Hannah Chu.
2. I understand these treatments/sessions are neither intended nor recommended as a substitute for professional medical advice.
3. I understand that I should seek the advice of my physician or other licensed healthcare professional regarding any medical condition that I may have or treatment that I wish to receive.
4. I understand that nothing contained neither on this form nor in my treatment/sessions is intended to be used for medical diagnosis or treatment.
5. I have received a copy of this form for my own records.

SIGNATURE: _____

DATE: _____

NAME (printed): _____

CITY: _____

EMAIL ADDRESS: _____

PHONE NUMBER: _____