



Client Waiver Form

I acknowledge that all statements, written materials, services, classes, workshops, and consultations offered by the North Country Spiritual Pathways and Wellness, LLC and Patricia Laurino are not intended to diagnose, treat, cure or prevent any disease or illness and are not to be considered any form of therapy, counseling or substitute for licensed medical/healthcare. When dealing with physical and/or mental illness or disease, I will always consult a qualified physician or therapist.

I acknowledge that all services offered by the North Country Spiritual Pathways and Wellness, LLC and Patricia Laurino are considered spiritual self-help only and should be used with discretion and at my own risk. North Country Spiritual Pathways and Wellness, LLC and Patricia Laurino shall be held harmless for all statements, written materials, services, classes, workshops, and consultations offered in person or online and shall not be held liable for their use.

I acknowledge that if I have a pacemaker or heart monitoring device, metal in my body, or if I am pregnant that I will check with my doctor before participating in Sound Baths/Healing.

I understand that all the information is of the expressed opinion and beliefs of Patricia Laurino and is founded upon her spiritual philosophy.

Signature

Date

Witness

Date