



BLUE LOTUS REIKI
The Usui Shiki Ryoho System of Reiki Natural Healing

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INTAKE

Name: _____ Birthday (month/day) _____

Phone/Text: _____ Email: _____

Have you had a Reiki Treatment before? Yes No

Have you had any other type of subtle energy healing before? Yes No

If Yes, please state name/type of treatment(s): _____

Why do you want a Reiki Treatment(s)? _____

Do you work in stressful conditions/environment? Yes No

Do you want Reiki for effects of medical treatments or medications? Yes No

Do you have any serious/chronic health issues? Yes No

How did you hear of Blue Lotus Reiki? _____



SERVICES OFFERED

(Please check all that apply.)

In-Person and Distant Treatments: (60 mins per session)

- Single Reiki Treatment session\$77
- Three Reiki Treatment sessions\$200
- Four Reiki Treatment sessions\$225
- Five Reiki Treatment sessions\$250
- Six Reiki Treatment sessions\$275
- Eight Reiki Treatment sessions\$325

PEMF and Detoxification Treatments:

- PEMF/(Infrared) TAO Mat Treatment Add-On to Reiki session.....\$25
- Single PEMF/(Infrared) TAO Mat Treatment session (20-30 mins).....\$40
- Single Detoxification Treatment session (30-60 mins).....\$50-70

NOTE: I also provide Bach Flower Essences consultations. Please ask for details.

Cancellation/Reschedule Policy:

If necessary, you may re-schedule your appointment **up to 24 hours before** your original appointment time, or you may cancel with a full refund of your prepayment. However, if you need to cancel **within 24 hours before** your appointment, then 50 percent of your prepayment will be refunded via the same payment app used for your payment. Rescheduling can usually be done within 24 hours of your appointment.

Prepayment is appreciated via Venmo or Zelle. A payment link will be sent to you.



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CONSENT

I hereby consent to receive the treatment(s) I have selected to be provided by Barbara Dellis/Blue Lotus Reiki (hereinafter “Barbara”) on the date and time we have mutually agreed to. I understand that as a Reiki Master, Barbara does not diagnose conditions nor will her treatment(s) substitute for or interfere with any treatments rendered by my medical providers as Reiki energy and/or PEMF only enhances other healing modalities.

I understand that the treatment(s) provided to me by Barbara is/are voluntary and that at any time, I may choose to end my treatments and will be refunded any unused payment(s). See Cancellation/Rescheduling Policy on Intake form.

I understand that I may experience 'healing reactions' during the 24 to 48 hours following the treatments provided. I understand that any information imparted during these sessions is strictly confidential in nature and will not be shared with anyone without my written permission. I also understand that any information exchanged during any session is educational in nature and does not constitute a diagnosis. I understand that only Barbara will have access to the information in my file. I do, however, give Barbara my consent to provide treatment notes/results to my medical providers, should I request this.

I understand that I assume full responsibility for my participation in the services provided and I hold harmless both Barbara and Symmetry Collective.

IMPORTANT:

Reiki treatments are not recommended for those with unset broken bones.

PEMF/Detoxification treatments are not recommended for those with the following conditions:

- Heart Pacemakers
- Bypass surgery
- Pregnancy or attempting to become pregnant
- Varicose veins, vascular disease or deep-vein thrombosis
- Multiple Sclerosis
- Open wounds or wounds on thin skin
- Using Coumadin or other blood thinners
- Using muscle relaxants
- Decreased skin integrity/temperature sensitivity

If you have any of these conditions, please do not sign this Consent (please check with your doctor/contact Barbara to discuss).

By my signature below, I hereby agree to the terms and conditions set forth in this Consent.

DATE: _____

NAME: _____

(Signature)

Blue Lotus Reiki/Barbara Dellis maintains Professional Liability Insurance coverage with NACAMS.