

**June BlueSpruce**  
**Shamanic Practitioner, Life Coach**  
**(206) 579-1203**  
**info@junebluespruce.com**

**CLIENT INFORMATION**

Name: \_\_\_\_\_ Date : \_\_\_\_\_ Birthdate: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: Please circle the one that you prefer me to use to reach you  
Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_  
Email: \_\_\_\_\_ Occupation(s) \_\_\_\_\_  
Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

**INFORMATION ABOUT MY PRACTICE**

Shamanic consultation and coaching provide the client with personal guidance and clarity that can benefit you in the process of healing, defining and reaching personal goals, and determining and following your life path. Neither is a substitute for medical treatment or psychotherapy. If you have an illness (physical, mental or emotional) or injury, please seek the appropriate professional help.

Your identity and any personal information that you share will be kept confidential. I will not disclose anything that could reveal your identity to anyone without your permission, except in very limited circumstances as provided by law. If we communicate via e-mail or cell phone, I will handle the communication confidentially as above, but please understand that these media are by their nature not secure.

Payment is due in full at the time services are provided, unless other arrangements have been made in advance.

A specific amount of time is allotted for each appointment. If you arrive late, that means the appointment will be shorter. You are responsible for paying the entire time scheduled. **If you need to cancel or reschedule an appointment, you need to give me at least 24 hours notice, except in cases of sudden illness or injury. If you give less than 24 hours notice, you are responsible for paying 1/2 the cost of the appointment the first time and the full cost if this should occur a second time.**

**CLIENT AGREEMENT**

I, \_\_\_\_\_, have read and understood the information above and agree to the terms described.

Signature : \_\_\_\_\_ Date : \_\_\_\_\_