

Ionic Foot Detox Consent Form By Life Should Feel Good

Client Information

Name:						
	Phone:					
Street Address:						
City:	State:					
Occupation:						
Date of Birth (birth year option	al):					
Ionic Foot Detox Client I	Health Information					
How did you hear about me?						
What is your main purpose for	coming today?					
What is your expectation for yo	our visit today?					
Have you had an Ionic Foot De	tox session before? If so, when?					
Current Stress Level (1 – 10, w	here 10 = very stressed):					
What are your current health co	oncerns?					



Please list any recent surgeries or traumas:					
Are you been treated by a Doctor or Health Practitioner now? (Y/N)					
If so, for what?					
Please answer the following with Yes or No (Y/N):					
I have a pacemaker or other battery-operated or electrical implantI am on heartbeat regulating medication.					
I am the recipient of an organ transplant.					
I am having an organ removed. I take medication for psychotic episodes or seizures.					
I take medication for psychotic episodes of seizuresI am currently undergoing chemotherapy or radiation.					
I have congestive heart failure.					
I am pregnant or breast-feeding.					
I need dialysis.					
I have open wounds on my feet.					
If you checked "Y" on any of these items, <u>I cannot treat you with the Ionic Foot Detox</u> without written approval from your health care professional.					
I, the undersigned, consent to the Ion Detox Therapy Foot Bath Treatment. I understand that these procedures are for the purpose of detoxification and are not intended to take the place of medical care or medications. I confirm that I do not have any contraindications to the Ionic Detox Therapy Foot Bath (as noted above). I understand that I take full					
responsibility for my own health and well-being.					
Client Signature:					
Date:					



Ionic Detox Foot Spa

The **Ionic Detox Foot Spa** would especially benefit individuals who:

- Have low immunity, high stress, use tobacco or alcohol.
- Have diabetes, hypertension, high blood sugar, rheumatism, or arthritis.

Benefits may include:

- Decreased joint stiffness.
- Muscle spasm relief.
- Increased blood flow.
- Pain relief and reduced inflammation.
- Aid in the process of weight loss.
- Improve immune system and overall health.

The **Ionic Detox Foot Spa** follows the holistic healing principle – it does not only treat a symptom, but it also enhances the whole body's functions. The treatment of the symptoms comes along naturally.

In addition, please read the following information and sign at the bottom:

- People with low blood sugar should eat before using the Ionic Foot Detox.
- Though not dangerous, persons having a metal joint implant may find exposure to the electromagnetic field generated by the Ionic Foot Detox to be uncomfortable. If discomfort is experienced, please notify your technician, and the session will be stopped immediately.
- Persons taking prescription medication should either wait to take medication after this treatment or take this medication at least four hours prior to treatment.
- Persons diagnosed with diabetes, congestive heart failure, or any other medical condition should consult their physician prior to implementing the Ionic Foot Detox as part of their wellness program.
- In addition to toxins being pulled out of the bloodstream, valuable electrolytes (calcium, potassium, sodium, and magnesium) may also be purged from the body. To safeguard against this possibility, users are encouraged to drink extra water and/or electrolytes after their session.



Possible Side Effects

The Ionic Foot Detox is a detoxification treatment. Those who have any degree of toxicity may experience some level of reaction. All individuals are unique, and I cannot guess your reaction(s) to a treatment. Some individuals have experienced fatigue, headache, or other symptoms similar to a cold or flu. These symptoms are temporary and part of the detox process.

Disclaimer

We do not make any claim to offer cures or treatment for any disease or illness. If you are sick, please consult your doctor.

Acknowledgement

By signing below, you acknowledge that you have read and understand this document and have received acceptable answers to all your questions and consent to receiving and Ionic Foot Detox. You hereby agree to release Roxanne Bobick of Life Should Feel Good, from any liability or damage that may incur due to the use of the Ion Foot Detox Cleanse.

Printed Name			
Signature			
Date			