

## **Practitioner/Client Contract**

### **The Client Agrees to the Following:**

**1)** To be open and honest about food journaling, food cravings, exercise routines, water intake, past medical history, all things relevant to your healing journey, and all medications and supplements being used.

**2)** To inform my Practitioner of any changes in life circumstances, stress load, changes in supplements or medications, changes in daily routines, or any other changes that might significantly impact my ability to reach my health goals.

**3)** If I'm currently being treated by a physician, I agree to let him/her know about any new herbs and/or supplements I want to try, any new exercises I want to incorporate, and/or any new changes in diet I want to incorporate. I also agree to take all educational information that I learn from my Practitioner and carefully discuss it, with my doctor (if I am seeing one), prior to implementing any new holistic strategies.

**4)** That any holistic methods I choose to incorporate are done under my own, free will and not under the diagnosis of my Practitioner.

**5)** To keep my Practitioner up to date on my most current doctor appointments and bloodwork results, so she has a current picture of what is going on with my health.

**6)** To never assume that my Practitioner is claiming that she can cure, treat, or diagnose, as this is beyond her scope of practice.

**7)** To be willing to be referred to an outside source (like a medical doctor, counselor, massage therapist, etc), if my Practitioner feels that we have run into any issues that are beyond her scope of practice.

**8)** To keep up communication, in between my scheduled sessions, so my Practitioner can address any quick questions I might have, or celebrate any victories I have had in my health journey, etc.

**9)** I agree to the following, regarding payments:

\*To make my payments on time, whether those payments are for a monthly subscription package, or for other services, like meal plans, test results, etc.

\*If my Practitioner is working on a project for me (like a meal plan, workout routine, etc), all work on the project will stop, until the account is paid in full.

\*That payment is due, whether or not I progress toward my goals at my desired pace.

**10)** I understand that my Practitioner is not going to be constantly glued to her smart device and will respond to my messages within her normal business hours of Monday-Friday 10am-2pm (Arizona Time). I understand that any responses from her outside of those business hours are an exception and not the rule.

**11)** I understand that failure to comply with any of these terms will directly impact my success, in reaching my goals and may result in the termination of my contract with my Practitioner.

**12)** Due to copyright laws and legal ramifications, I agree that I will not share the PDFs and videos, created by AntiParasiticMamma, with anyone else. I understand that the videos and PDFs that AntiParasiticMamma shares with me are only for paying clients.

### **The Practitioner Agrees to the Following:**

**1)** To honor my client's unique story and to give my client my full attention, in our sessions together.

**2)** To keep everything in our sessions confidential and to give my client a listening ear that is free of judgment.

**3)** To remain open to constructive criticism and to provide a safe space for the client to express feelings of hurt, even if those feelings may be about something that I have said.

**4)** To give 100% support to my clients on their health journey and to provide them with the education needed to empower them to heal their bodies, holistically.

**5)** To check in with my client at least twice per month, during my normal business hours of Monday-Friday 10am-2pm (Arizona Time), by voice message or text (apart from our scheduled sessions together), to see how their week is going and to offer encouragement. Any check-ins with my client outside of my normal business hours are an exception and not the rule. Once the contract has reached an end, I am no longer obligated to check in twice per month, even if the client still has minutes left over in their time bank with me.

**6)** To return a client's message, as soon as possible, during my normal business hours of Monday-Friday 10am-2pm (Arizona Time). Any check-ins with my client outside of my normal business hours are an exception and not the rule (unless there is a dire circumstance, client messages are returned within 72 hours, or less).

**7)** To never claim to cure, treat, diagnose, as this is beyond my scope of practice.

**8)** To refer you to outside sources (like a medical doctor, counselor, massage therapist, etc), when we run into any issues that are beyond my scope of practice.

**9)** To do everything in my power to provide my clients with all the latest holistic educational materials & tools necessary to help them succeed in meeting their health goals (by way of meal plans, tailored workouts, daily schedules, educational videos & materials, etc).

**The intent of this contract is to help the client to achieve the following health goals:**

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At the end of the contract, the Practitioner and client can re-asses these goals, to determine if the client has other goals that he/she wants to address.

**Please put a check mark next to the Monthly Subscription Package you are choosing:**

**\*Option One - 30 minutes of my time each month**

6 month subscription \$47 per month (180 minutes of my time spread out over 6 months).

9 month subscription \$46 per month (270 minutes of my time spread out over 9 months).

12 month subscription \$45 per month (360 minutes of my time spread out over 12 months).

**\*Option Two - 45 minutes of my time each month**

6 month subscription \$72 per month (270 minutes of my time spread out over 6 months).

9 month subscription \$71 per month (405 minutes of my time spread out over 9 months).

12 month subscription \$70 per month (540 minutes of my time spread out over 12 months).

**\*Option Three - 60 minutes of my time each month**

\_\_\_ 6 month subscription \$97 per month (360 minutes of my time spread out over 6 months).

\_\_\_ 9 month subscription \$96 per month (540 minutes of my time spread out over 9 months).

\_\_\_ 12 month subscription \$95 per month (720 minutes of my time spread out over 12 months).

\_\_\_ **\*Option Four - pay as you go/\$100 an hour (contract will last 6 months)**

**Please circle which method of payment you will be using:**

Messenger    CashApp    Zelle    Venmo

The below named client and Practitioner have entered into a contract, which begins on the date this document is signed, by both parties, below. The client agrees to make the first payment of \$\_\_\_\_\_, toward the monthly subscription package circled above, on the date of:\_\_\_\_\_. These monthly payments will be made, consecutively, on the following date of each month: \_\_\_\_\_, until the account is paid in full (and/or) until the 6-12 month contract comes to an end. The client also agrees to pay separately for any other services rendered, that fall outside the monthly subscription contract (like going over test and lab results, meal plans, workout routines, etc), within 48 hours of receiving that service.

Client's Printed Name:\_\_\_\_\_

Client's Signature:\_\_\_\_\_

Date Signed:\_\_\_\_\_ (contract officially starts)

Practitioner's Printed Name:\_\_\_\_\_

Practitioner's Signature:\_\_\_\_\_

Date Signed:\_\_\_\_\_ (contract officially starts)

Monthly Subscription Package End Date:\_\_\_\_\_ (contract officially ends)