

NATURAL HEALTH CONSULTATION

Our services neither diagnose nor prescribe for disease conditions. All clients are encouraged to seek competent medical help when those services are deemed necessary. The client accepts total responsibility for his/her own health care and maintenance.

Nothing said, done, performed, typed, printed or produced by us is intended or meant to diagnose, prescribe, treat a disease or take the place of a licensed physician. Our program (which included several services) involves Lifestyle Analysis, elimination of harmful lifestyles and habits, and the cultivation of positive mental attitudes. The modalities are designed solely to enhance physical fitness, mental attitudes and alertness, and good nutrition.

We do not diagnose or make any attempt to cure any disease condition, and we make no claims or imply any claims that suggestions given to the client are to cure any condition. Furthermore, we do not claim that any supplemental material we may suggest will cure any condition or that its purpose is to treat any condition. In essence, we do not prescribe for or treat any disease.

Nutritional research assessments and suggestions are intended only for the support and maintenance of optimal health and do not involve diagnosing or prescribing of food supplements or remedies for the treatment of disease conditions.

Nature's Link is committed to the highest level of integrity in all our dealings with our clients. We will take appropriate actions and safeguards to protect your personal information.

I have read all of the above and understand and agree with it completely. I therefore consent to participation with Kristine Devillier in a program within the framework stated above, on this

_____ day of _____ 20____ .

Clients Signature _____

Print Name _____

Health Counselor's Signature _____

DISCLAIMER Information on this site is provided for informational purposes and is not meant to substitute for the advice provided by your own physician or other medical professional. You should not use the information contained herein for diagnosing or treating a health problem or disease, or prescribing any medication. You should read carefully all product packaging. If you have or suspect that you have a medical problem, promptly contact your health care provider. Information and statements regarding dietary supplements have not been evaluated by the Food and Drug Administration and are not intended to diagnose, treat, cure or prevent any disease.

NUTRITIONAL & LIFESTYLE SURVEY

Name _____ Referred By _____

Address _____ City, State & Zip _____

Home Phone _____ Work _____ Cell _____

Age _____ Sex _____ Height _____ Weight _____ Occupation _____

E-mail Address _____ D.O.B. _____

DIET & NUTRITION

a. How often do you use the following? please circle (1-daily, 2-weekly, 3-occasionally, 4-never)

Seafood	1 2 3 4	Fruits/Vegs	1 2 3 4	Fast Foods	1 2 3 4
Refined Sugar	1 2 3 4	White Flour	1 2 3 4	Fried Foods	1 2 3 4
Caffeine	1 2 3 4	Soda	1 2 3 4	Alcohol	1 2 3 4
Dairy Foods	1 2 3 4	Salt	1 2 3 4	Aspartame	1 2 3 4
Beef	1 2 3 4	Chicken	1 2 3 4	Pork	1 2 3 4
Tobacco	1 2 3 4	Grains	1 2 3 4	Pasta	1 2 3 4

b. How much water do you drink each day? _____ oz

What kind of water do you drink? _____

c. List any nutritional supplements you are now taking. _____

d. List medications _____

e. List surgeries _____

f. Blood Type _____ Pregnant? _____ Nursing? _____ Allergies? _____

GENERAL HEALTH PRACTICES

1. How much sleep do you get each night on the average? _____

2. What type & how often do you exercise? _____

3. Do you feel like you are under stress? Explain. _____

4. How often do your bowels eliminate: _____

5. What is your energy level like? _____

Please list your current health concerns you would like changed.
