

HOLISTIC HEALING ARTS

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**VANDA GODFREE, RHN
REGISTERED HOLISTIC NUTRITIONIST**

Nutritional Client Statement

I hereby attest to the following:

That I am here, on this and my subsequent visits, solely on my own behalf and not as an agent for any federal, provincial, municipal or professional agency on a mission of entrapment or investigation.

I fully understand that Vanda Godfree is not a medical doctor and I am not here for medical diagnostic treatment procedures.

The services provided by Vanda Godfree are at all times restricted to consultations on the subject of nutritional matters intended for general nutritional well-being and do not involve the diagnosing, prognosticating, treatment, or prescribing of remedies for the treatment of any disease, or any licensed or controlled act which may constitute the practice of medicine in this province.

If you are currently seeing one of our health professionals:

In the interest of obtaining maximum benefit from Vanda Godfree's dietary and supplement recommendations, I hereby give my Naturopathic Doctor or any other health professional in this clinic consent to release information pertinent to my dietary needs.

This agreement is being signed voluntarily and not under duress of any kind.

Signature: _____ Date: _____