WE'RE ALL WE NEED HEALING

PET REIKI INTAKE FORM

Owner / Guardian Full Name: _____
Phone Number: _____
Email: _____
Street Address: _____
City/State/Zip: _____

Are you able to receive text message follow-ups? ☐ Yes ☐ No

Animal Information

Animal's Name: _____ Sex: ☐ Male ☐ Female
Age: _____ Breed: _____ Species: _____

Any behavioral concerns (kicking, biting, fear of strangers, etc.)? _____

Our focus for the session: _____

Session Preferences

Is photography or short video allowed for educational or promotional use? ☐ Yes ☐ No

Would you like to be contacted for future session reminders, limited offers, or updates? ☐ Yes, please ☐ No, thank you

Consent & Agreement

Please read carefully and sign below.

I understand that Reiki and energy work are non-medical, holistic practices that support relaxation and balance and do not replace veterinary care. Results are not guaranteed, and I am responsible for my animal's health and seeking veterinary care when needed.

I confirm I am the owner or authorized guardian and consent to services. I release Zoë Van Der Linden and WE'RE ALL WE NEED HEALING from all liability related to services.

I acknowledge that animals can behave unpredictably and I am responsible for maintaining a safe environment during sessions.

Signature of Owner/Guardian: _____ Date: _____

Privacy Notice

All client and animal information will remain confidential and will not be shared with third parties without written consent of the owner/guardian, unless required by law.