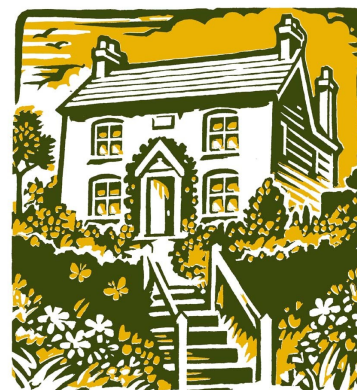


## Declaration by the Practitioner

I, \_\_\_\_\_, am a Bach Foundation Registered Practitioner (BFRP) working under the Bach Foundation Code of Practice. My role is to help teach you about Dr Bach's system of remedies and help you use them to help yourself.

Bach remedies aim to improve everyday emotional states. Taking them may in turn lead to other health benefits. They do not, however, replace direct medical or psychological treatment. You as client have sole responsibility for seeking qualified help for any medical conditions, symptoms or other issues that might require qualified intervention.



**Bach Foundation**  
REGISTERED PRACTITIONER

If I feel you may need additional help I will advise you of this, but working as a BFRP does not in itself qualify me to recognise, diagnose, prescribe for or treat any mental or physical illness, and nothing said or done during the course of a Bach consultation should be construed as evidence to the contrary. If I do recommend you seek additional professional help, you take full responsibility for acting on that advice.

If you have been receiving treatment from a doctor or any other professional I strongly advise you to inform him or her about your decision to use Bach remedies. Any decision to stop or reduce any other treatment you are receiving should be taken by you in conjunction with the professional responsible for that treatment.

Everything discussed during a consultation will normally remain confidential. However, I reserve the right to share information discussed during the consultation with an appropriate person if I am concerned that your safety or that of others might be at risk. I will discuss this issue with you should it arise, before sharing information with anyone else.

Any fee I charge is to cover the time I have spent helping you to learn and use the system. If at the end of the consultation you choose to take one or more Bach remedies you may mix yourself a treatment bottle from my private stock or ask to have a bottle mixed for you. This is understood to be your personal choice and is not part of the service offered.

Signed:

Date:

## Declaration by the Client

I, \_\_\_\_\_, (name of client) have read and understand the above declaration.

Signed:

Date:

Address: