

*Cabrera Consultants*

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**INFORMED CONSENT and FULL DISCLOSURE DOCUMENT**

The purpose of this document is to clearly delineate the scope of practice assumed by Chanchal Cabrera and to ensure that no misunderstanding occurs between herself and any clients as to the expected course or progression of treatment.

Please read the statement below and sign your agreement with it  
Bring this page to the first appointment.

The Province of British Columbia does not at this time license Herbalists. Chanchal Cabrera is not a medical doctor and does not claim to diagnose, treat or cure any medical conditions or pathologies nor prescribe medicine nor in any way represent herself as so doing. For any medical condition, you are advised to seek care from an appropriate medical practitioner. Whether you chose to engage a medical practitioner or not for your care is your right and Ms. Cabrera assumes no responsibility for your decision in this matter.

I, the undersigned, assume all responsibility for decisions I make regarding my health, recognizing that (a) no claims are made for herbal medicine, nutritional or dietary recommendations to treat or cure any medical condition (b) all information given is for educational purposes only (c) there is no implied or stated guarantee of success or effectiveness of any specific treatment plan or guidelines (d) I am free to act upon or disregard the recommendations of Chanchal Cabrera as I so choose. I hereby release Chanchal Cabrera from all responsibility for my actions and any consequences thereof in the present time and in the future with no constraints. I hereby affirm that I consent and agree to the above statements of my own free will and request to engage the services of Chanchal Cabrera in a professional relationship pursuant to the statements herein.

\_\_\_\_\_  
CLIENT'S NAME –Please Print

\_\_\_\_\_  
CLIENT'S SIGNATURE

\_\_\_\_\_  
TODAY'S DATE

Or

\_\_\_\_\_  
CLIENT'S REPRESENTATIVE

\_\_\_\_\_  
SIGNATURE OF CLIENT'S REP.

\_\_\_\_\_  
TODAY'S DATE

RELATION TO CLIENT \_\_\_\_\_

### **Cancellation Policy**

When you schedule an appointment, time is reserved especially for you and no one else, and to provide the type of care you are looking for, Chanchal limits the number of clients she accepts each week. Also, time goes into preparing for your appointment before the scheduled time. Thus, a minimum of 72 hours notice is required for cancellations or you may be billed for the appointment.

### **Client redress**

As a professional herbalist it is my duty and responsibility to provide you with the best health care information and support that I can. If you have any problems or are in some way unsatisfied with your experience here, please let me know. You may also wish to contact the grievance committee of the American Herbalists Guild at

#### **American Herbalists Guild**

PO. Box 3076  
Asheville, NC 28802-3076

617. 520.4372  
office@americanherbalistsguild.com

Or

#### **Canadian Herbalist's Association of BC (CHA of BC)**

Box 8326  
Victoria Main  
Victoria, BC V8W 3R9

general@chaofbc.ca

Thank you.