

Unity of Energy

Cosmic Light Worker ~ Julia Meads

Reiki Booking Form

Please enter workshop title: (Reiki Level 1, 2, 3, or 4)	
Dates of workshop:	
Name (First/Last):	
Address 1:	
Address 2:	
Address 3:	
Postcode:	
Email:	
Contact Telephone (s):	
Date of Birth:	
Occupation:	
Workshop Cost:	£
Please state if you are paying in full or a deposit:	
Cheque Enclosed:	£
Balance to pay:	£
Your Signature:	
Date:	

Please continue to page 2 below.

<p>Have you had Reiki before? (Yes/No)</p>	
<p>If you have received Reiki under a previous Master, please provide name and contact details (it is good manners to inform them of your intentions)</p>	
<p>Do you have any physical/medical conditions? (Yes/No)</p>	
<p>If yes, please give details</p>	
<p>Are you currently on any medication? (Yes/No)</p>	
<p>If yes, please give details</p>	
<p>Have you consulted your doctor recently? (yes/No)</p>	
<p>Any further relevant historical/medical comments?</p>	

Please continue to page 3 below

Do you have any current concerns regarding any of the below (please all that apply)

Stress		Relationships		Sexuality		Bereavement	
Back Problems		Heart Problems		Digestive disorders		Menstrual problems	
Family		Work		Developmental		Addiction	
Anxiety		Sexual problems		Illness		Eating disorder	
Weight habits		Self-esteem		Phobias		Nervous System	
Suicide		Guilt		Poor Sleep		Fears	
Afraid to go out		Depression		Confusion		Spiritual	
Smoking		Unable to cope		Other.....			

Reasons for wanting to do the course

.....

.....

.....

Signature.....

Deposits are non-refundable but are transferable by agreement.

Cheques payable to J.Meads

Please send this form completed with your cheque to:
 Julia Meads, 44 Moor Park, Wendover, Bucks HP22 6AX