

The Emotion Code Intake Form

Date:

Name:

Address:

Phone:

Age/DOB:

Email:

Occupation:

Please select session desired: In Person Phone Skype (Skype name: _____)

Reason for wanting an Emotion Code session or INTENTION for healing:

Please list any biological children with first names (for purpose of inherited trapped emotions):

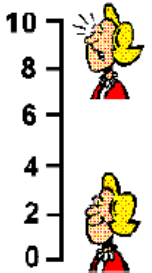
Do you drink the amount of water daily that your body needs to stay hydrated? Yes ____ No ____
Please increase the intake of water to receive the Emotion Code Session(s).

Issue/Concern/Ratings:

List your top three stressors/concerns & or areas of pain – please give a number rating to each one on a scale of 1-10 (*10 being the worse*) of how stressful or painful they are for you?

- * Stressor/Pain #:
How does this stressor make you feel?
- * Stressor/Pain #:
How does this stressor make you feel?
- * Stressor/Pain #:
How does this stressor make you feel?

Intensity Meter



Thank you for honoring your Heart and asking for an Emotion Code session. Your decision is a conscious choice in direct communication with your Higher Self in taking a step forward in your awakening and healing.

DISCLAIMER: Releasing trapped emotions using The Emotion Code, or any other type of Energy Healing practiced by Sacred Intention practitioners, whether in person or by proxy, is not a substitute for medical care. This information is not intended as medical advice and should not be used for medical diagnosis or treatment. Information given to you from any session is not intended to create any physician-patient relationship, nor should it be considered a replacement for consultation with a health care professional.