

Amit Singh

HEALING CLINIC

Registration Form

Name _____

Date of Birth _____ Gender _____ Phone Numbers _____

Address _____

Occupation _____

E-mail _____

Emergency Contact _____

QUESTIONNAIRE (circle the correct number)

1. How happy are you as a human being ? 0 1 2 3 4 5 6 7 8 9 10
2. How kind are you as a human being 0 1 2 3 4 5 6 7 8 9 10
3. How open minded are you as a human being ? 0 1 2 3 4 5 6 7 8 9 10
4. How very happy can you be when you really want to be happy ? 0 1 2 3 4 5 6 7 8 9 10
5. How happy are you as a person when you have to do new things in life ? 0 1 2 3 4 5 6 7 8 9 10
6. How do you feel when you have to do repeated things in life ? 0 1 2 3 4 5 6 7 8 9 10
7. How generous are you to people who don't want to talk to or engage with you after you are upset with them? 0 1 2 3 4 5 6 7 8 9 10
8. How generous are you to people who are very kind to you and who will take care of you when you need them ? 0 1 2 3 4 5 6 7 8 9 10
9. How generous are you to people who are around you every day? 0 1 2 3 4 5 6 7 8 9 10
10. How much time do you spend thinking about yourself ? 0 1 2 3 4 5 6 7 8 9 10

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Consent to Treatment Form

Please read the following and sign your consent to treatment after understanding the contents

Treatment at Prema Clinic is very unique and because of its uniqueness, it sets up its own special need to be understood before we engage in a formal relationship of client and practitioner.

I consider you to be completely equal to me with your unique rights and obligations just as I have my own unique rights and obligations. As a healing clinic, I am required to maintain paperwork as well as keep your information strictly confidential as per the laws of ([Health Insurance Portability and Accountability Act](#)). Your information will always remain confidential as per the laws and if you wish to receive a printed copy of our privacy practices, you are welcome to do so.

Now, we come to the treatment method. I do healing of a kind that comes directly from my heart and from the deepest source of my spirit. I call it the 'Self Arising Method'. It means that it comes completely from my heart. Its work is to transform you as a person to become somebody who comes completely from the heart and has no suffering in their lives whatsoever.

I do not treat symptoms directly, I only treat the root and the effect of the problem from a very deep place within your own self. I do not treat them directly at all. I treat them from the place inside your heart which is the best place in the world. I treat them from the most perfect place in the world that is inside you.

You are treated as a whole person in my clinic. I need you to know that you will be treated completely and genuinely from the heart and nowhere else. You can be assured that it will be the 'right' work for you.

Any situations that arise and need any outside help for resolution need to be resolved through legal mediation.

Print Name _____

Signature _____

Date _____

Received by (Signature,Name,Date)
