

# ***Client Agreement for Services Provided by Craig Weiner, Tap Your Power, LLC***

Welcome!

This document contains important information about my professional services and business policies. It is rather long because it covers a wide range of possible situations, many of which will not apply to you. Still, it provides a framework for understanding the services you are considering. Please read it carefully and note any questions you might have. We can discuss them at our next meeting. If you decide to use my services and sign this document, it will represent an agreement between us.

## **EMOTIONAL FREEDOM TECHNIQUES (EFT) and MATRIX REIMPRINTING**

EFT is an approach that involves balancing and restoring your body's natural energies for the purposes of increasing your vitality, strengthening your mental capacities, and optimizing your health. The form I use draws from EFT as taught by the founder Gary Craig and continues to be taught as Clinical EFT. I am certified through the Association for the Advancement of Meridian Energy Techniques (AAMET) as a certified master EFT trainer as well as a certified trainer and practitioner of Matrix Reimprinting as developed by Karl Dawson and is a complementary modality to EFT that combines EFT with inner child work and memory reconsolidation protocols.

The techniques you will be experiencing and learning have a beginning history in Chinese Medicine as the tapping stimulates acupuncture meridian. The variety I use and teach is thoroughly modern and does not require adherence to any particular set of beliefs or practices. The core concept is that your personal well-being and effectiveness are directly related to the state of your body's energies and emotional states. You may have heard about subtle energy through terms such as the life force energy, chi, meridians or biofields. In many healing traditions, the "life force," the animating power whose presence defines life and whose absence defines death, is understood as a form of subtle energy. Eastern cultures, in particular, have studied such energies for millennia and have successfully applied their understanding for enhancing both physical and emotional health. EFT engages the stimulation and balancing of these subtle energy systems.

The techniques I will be using and teaching you are based on the premise that by promoting balance and flow in the body's electromagnetic and subtle energies, health and wellbeing are enhanced. The techniques may involve the use of certain postures or movements of stimulating by tapping specified areas of the skin on the face, upper body and hands. This helps to move, balance, enhance, and restore the body's energies.

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EFT is a brief intervention combining elements of the recollection of past events or the anticipation of future events, identifying associated emotions, and somatic stimulation. It is often referred to as 'tapping' as it uses a two finger tapping process with a cognitive acceptance statement. EFT has been researched in more than 20 countries, by more than 60 investigators, whose results have been published in more than 100 different journal articles. These clinical trials have shown that EFT is able to rapidly reduce the emotional impact of memories and incidents that trigger emotional distress. Three meta analyses and over 40 randomized controlled trials have now been published regarding EFT's effectiveness for a wide range of conditions.

MATRIX REIMPRINTING (MR) combines elements of EFT tapping with the recalling of past events and possible future events in order to neutralize the negative emotional and physiological stress related to those events. It is hypothesized that this technique utilizes elements of memory recall, with elements of inner child work, timeline exploration and the steps of memory reconsolidation.

### **WHAT ARE THE LIMITATIONS OF MY PRACTICE?**

Although EFT uses the term "emotional," it does not imply that EFT practitioners are practicing therapy. EFT is a term used by many training programs that teach people how to assess and correct for energy imbalances in the body. EFT is not a substitute for the diagnosis and/or treatment of medical or mental health conditions by a licensed health care professional. If you have a disorder that has been diagnosed by a licensed medical or mental health professional or a condition that should be evaluated by a licensed health professional, my services should be used only in conjunction with your obtaining that care. **As an EFT/MR practitioner, I do not diagnose or treat medical or mental health disorders**, nor am I trained or licensed to do so. EFT attempts to optimize the body's overall health and vitality, but it is not to be used instead of appropriate care from a licensed professional. Besides the fact that EFT does not diagnose or treat illness, another difference between my services and typical visits to a medical doctor is that effective energy work requires your active involvement between sessions. Our sessions will establish energy patterns that optimize body, mind, and spirit. Reinforcing these new patterns through the homework exercises I assign you extend the benefits you receive in your sessions. EFT brings disturbed energies back to a state of balance and harmony. These corrections will generally consist of various forms of light tapping. You will be asked if I have your permission to do some of the tapping on your face and upper body by me or you may do this yourself. If you are uncomfortable with being touched or with any of the procedures being used, please tell me immediately and I will instantly stop. While the methods I use and teach are gentle and considered non-invasive, it is possible that physical or emotional after-effects may occur after your energies have been stimulated and adjusted. In some instances dizziness, nausea, tiredness and nervousness are unusual but not unheard of side effects of energy work. If any procedure is disquieting or leads to discomfort, please tell me at once. I will instantly stop if you request me to do so and I will provide a technique to counter the discomfort.

## WHAT IS THE PROCESS?

Our **Initial Discovery Session is 30 minutes in length**. This allows sufficient time for us to **establish goals** and to **review your personal history related to the goals you would like to achieve**. If during the initial Discovery Session information is uncovered that establishes that working together requires the collaborative use of a licensed physical or mental health care provider then that will need to be discussed and arranged. **If it is revealed in the Discovery Session or in Subsequent Sessions that there are diagnoses involved or behavioral circumstances that are deemed outside of my scope of practice then I will make referral recommendations and you will be reimbursed for the remaining unused sessions.**

**The following sessions are 60 minutes in length.** They will include utilizing the techniques already mentioned as well as coaching techniques to support you in the achievement of your desired goals. Homework will be assigned at the conclusion of each session to support your progress. You will be taught tapping as a self help tool with guidelines for its application.

## MY BACKGROUND

I am an AAMET Advanced Accredited Certified EFT Practitioner and Master EFT Trainer of the Emotional Freedom Techniques (EFT). I have been in private coaching practice for the past 8 years. While I am also a practicing licensed chiropractor with over 25 years of experience, in our working relationship I will not be practicing chiropractic analysis nor treatment.

## PROFESSIONAL RECORDS

I take notes during a session to assist in our work and for only the current series of sessions only. These are kept and stored for a period of 7 years in paper but not digital format.

## CONFIDENTIALITY

With the exception of special situations described in the numbered list that follows, you have the absolute right to the confidentiality. I cannot and will not tell anyone else what you have told me, or even that you are working with me without your prior written permission. Under the provisions of the Health Care Information Act of 1992, I may under certain circumstances legally speak to another health-care provider or a member of your family about you without your prior consent, but I will not do so unless the situation is an emergency. I will always act so as to protect your privacy to the best of my ability. You may direct me to share information with whomever you choose, and you can change your mind and revoke that permission at any time. You may request anyone you wish to attend a session with you. You are also protected under the provisions of the Federal Health Insurance Portability and Accountability Act (HIPAA). This law ensures the confidentiality of all electronic transmission of information about you. Whenever I

transmit information about you electronically it will be done with special safeguards such as a secure server to ensure confidentiality. If you elect to communicate with me by e-mail at some point in our work together, please be aware that e-mail is not completely confidential. All e-mails are retained in the logs of your or my Internet service provider. Although under normal circumstances no one looks at these logs, they are, in theory, available to be read by the system administrators of the Internet service provider. As part of your treatment record, I will keep any e-mail I receive from you, and any responses that I send to you.

**Following are seven exceptions to your right to confidentiality:**

1. There are some situations in which I am legally obligated to take action to protect others from harm, even if I have to reveal some information about a client's treatment. For example, if I believe that a child, an elderly person, or a disabled person being abused, I must file a report with the appropriate state or local agency.
2. If I believe that a client is threatening serious bodily harm to another, I am required to take protective actions.
3. If I believe that you are in imminent danger of harming yourself, I may legally break confidentiality and contact the police, a local crisis team, or a family member or other intimates.
4. If you tell me of the behavior of another named health or mental health care provider that suggests this person has either 1. engaged in sexual contact with a patient, including yourself, or 2. is impaired from practice in some manner due to cognitive, emotional, behavioral, or health problems, then the law requires me to report this to the practitioner's state licensing board. I would inform you before taking this step. If you are my client and are also a health-care provider, however, your confidentiality remains protected under that law from this kind of reporting.
5. In certain legal proceedings, particularly those involving child custody or those in which your emotional condition or treatment is an important issue, a judge may order my testimony. Confidentiality is not protected when a judge makes such an order or in certain legal situation in which such confidentiality may be an issue
6. If I am asked to provide services to your spouse, partner, or another member of your family, we will in advance establish the limits of confidentiality. It generally confines a practitioner's effectiveness when required to keep secrets, so my policy in most circumstances is that what you say and what we do can be shared with other family members I am working with. If this is what we establish, do not tell me anything you wish kept secret from other intimates who are receiving sessions from me. If confidential information is a concern, it may be better for each family member to work with a different practitioner.

7. I may occasionally find it helpful to consult other professionals about a client. During a consultation, I make every effort to avoid revealing the identity of the client. The consultant is also bound to keep the information confidential. If you don't object, I will not tell you about these consultations unless I feel that it is important to our work together. Although this written summary of exceptions to confidentiality should prove helpful in informing you about potential problems, please discuss with me any questions or concerns you may have. I will be happy to explore these issues with you, but formal legal advice may be needed from an attorney because the laws governing confidentiality can be quite complex.

## **MINORS**

If you are under eighteen years of age, please be aware that the law may provide your parents or legal guardians the right to examine my records of our work together. It is my policy to request a written agreement from parents to waive their right to access your records. If they agree, I will provide them only with general information about our work together unless I feel there is a high risk that you will seriously harm yourself or someone else. In this case, I will notify them of my concern. Before giving them any information, I will discuss the matter with you, if possible, and do my best to handle any objections you may have about what I am planning to discuss.

## **YOUR COMMITMENT**

Working with a new client requires a minimum requirement of 6 sessions (1 Discovery Session followed by 5 tapping sessions). In addition to scheduled appointments, I also prorate the \$250 hourly fee for other professional services you may request that might include telephone conversations lasting longer than 10 minutes, listening to lengthy voice mail messages, reading and responding to emails other than for routine business, attending meetings with other professionals you have authorized, and preparing requested records or treatment summaries. If you become involved in legal proceedings requiring my participation, you will be expected to pay for my professional time even if I am called to testify by another party. Because of the difficulty of legal involvement, I charge \$250 per hour for preparation and attendance at any legal proceedings and please recall that no session notes are maintained.

## **BILLING AND PAYMENTS**

**You are required to return your signed Agreement Form and make payment a minimum of 48 hours in advance of your initial session.**

Payment schedules for other professional services will be agreed to when they are requested.

**If you are late to a session**, we will still end on time and not run over into the next person's session.

**If you miss a session without canceling, or cancel with less than twenty-four-hours' notice, you must pay for that session by the time of our next meeting unless we both agree that you were unable to attend due to circumstances out of your control.**

In circumstances of unusual financial hardship, we can discuss a payment installment plan. If that is done and your account has not been paid for more than sixty days and arrangements for payment have not been agreed upon, I have the option of using legal means to secure the payment. This many involve hiring a collection agency or going through small claims court. If such legal action is necessary, its costs will be included in the claim. In most collection situations, the only information released is the client's name, contact information, dates and type of services provided, and the amount due.

## **CONTACTING ME**

I am often with a client or otherwise not immediately available by telephone. When I am unavailable, you will reach my voicemail. I monitor it frequently and will make every effort to return your call on the same day you make it, with the exception of weekends and holidays. If it will be difficult to reach you, please inform me of some times when you will be available. If you are unable to reach me and feel that you can't wait for me to return your call, contact your family physician or, if you are experiencing a medical emergency, call 911 or go the emergency room of a nearby hospital.

## **OTHER ASPECTS OF OUR RELATIONSHIP**

You have the right to ask me questions about anything that happens in our work together. I'm always willing to discuss how and why I've decided to do what I am doing, and to look at alternatives that might work better. You can feel free to ask me to try something that you think will be helpful. You can ask me about my training for working with your concerns and can request that I refer you to someone else if you decide I'm not the right practitioner for you. You are free to terminate our work together at any time. I never engage in sexual intimacies with clients or former clients and generally avoid social and business relationships. Beyond the legal and ethical considerations, our work together will be most effective when kept free from possible outside entanglements.

## **PHYSICAL CONTACT**

Of course with working in an online format there is no physical contact. For in person clients, you should expect that you will be tapping on your own body. On the rare occasion that I deem it supportive to perform tapping upon you I will always explain ahead of time where these points are and I will always ask permission to do so ahead of time. Touch can also be a potential problem in a healing relationship if you have had a history of paranoia, have been diagnosed with borderline personality disorder, have been abused, have suffered from other types of trauma, or if you tend to dissociate or detach from your sense

of self. Prior to starting our work together, please let me know if you fall into any of these categories. We can discuss any emotional risks associated with touch that may be of concern to you. Furthermore, if you have any misgivings, doubts or any negative reactions to any physical contact, it is very important that you let me know as soon as possible so that we can discuss your concerns. If you are uncomfortable talking to me, I encourage you to talk through your concerns with another professional. If you wish, I can make a referral for you.

## **LEGAL PROCEEDINGS**

If you are involved in legal proceedings based on your having been traumatized, please understand that the goals of our work together may involve healing the physical and emotional aftermath of the trauma, and this could adversely affect your ability to provide legal testimony that carries the same impact as it would prior to our work.

## **TERMINATION OF SESSIONS**

Normally, you will be the one who decides when our work will end, but there are three exceptions to this. If I determine that I am unable, for any reason, to provide you with the services you are requesting at a high professional standard, I will inform you of this decision and refer you to another practitioner who may better meet your needs. Second, if you verbally or physically threaten or harass me, my office, or my family, I reserve the right to terminate you from my practice immediately and unilaterally. Third, I reserve the right to refuse or terminate a session if you or anyone in the session is suspected of being under the influence of a mood-altering substance. You will be responsible and charged for the full payment of the normal fee.

## **AWAY FROM OFFICE**

I am away from the office regularly for conferences, teaching/trainings and for vacations. I will make every effort to tell you well in advance of any anticipated lengthy absences and to discuss other options for continuing to work toward your goals during my absence.

## **COMPLAINTS**

If you are unhappy with that way our work together is proceeding, I hope you will talk about it with me so I can respond directly to your concerns. I will take such concerns seriously and meet them with care and respect. You are also free to discuss any complaints about me with anyone you wish. You do not have any responsibility to maintain confidentiality about what I do or say. You are the person who has the right to decide what you want kept confidential. If you believe that I have been unwilling to listen and respond, or that I have behaved unethically, you can register a complaint about my behavior you can register a complaint through AAMET Ethics Board at <http://www.aamet.org/contact-us/ethics-committee>.

Except in the case of gross negligence or malpractice, I or my representative(s) agree to fully release and hold harmless (Name of Practitioner) from and against any and all claims or liability of whatsoever kind or nature arising out of or in connection with my session(s).

Your signature below indicates that you have read the information in this document, understand it fully, have discussed any questions or matters of concern with me and/or others, and agree to abide by its terms during our professional relationship.

**By typing your name** here, **you** are **signing** this agreement **electronically**.

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_