**Consent to treatment and Terms and Conditions for All Body Holistic Health**

By signing this document, you acknowledge and agree to the terms and conditions stated below.

* All Body Holistic Health treats all information collected from clients as confidential. Information will be stored and used in accordance with the current ***Information Privacy Act 2009****.* A copy of the Act can be found on the Queensland Government website under the ‘*Privacy and right to information*’ section.
* All Body Holistic Health collects and keeps a record of all information disclosed during consultations and personal information for administration purposes. Your health record will not be released to anyone without your written consent unless required by law.
* You can view your record at any time and request a copy with adequate notice to the practice, allowing time for printing and administration. The cost associated with reproduction of documents is client responsibility and must be paid before clinical notes will be compiled.
* All Body Holistic Health may obtain a second opinion from another internal practitioner in the interest of providing you quality consultation. This will be done in a professional manner and all identifiable information will be excluded.
* You acknowledge Matthew Schoch is a Naturopath not a medical doctor. The information provided to you during consultation is intended to be used in conjunction with the guidance of your physician.
* You agree to inform All Body Holistic Health of any changes to your medical/health condition, including new medications, herbs, vitamins, supplements, new injury, diagnosis or undiagnosed conditions.
* Clients are financially liable for treatment rendered at the time of consultation. Accounts are not available within this practice and will be respectfully declined. Price of products will be charged before they are dispensed by the clinic, this is because some items are uncommon and obtained especially for you.
* I acknowledge queries and concerns relating to health or treatment are to be brought up within the consultation environment, this is for legal and financial protection. Any urgent queries please contact the clinic directly during office hours either by phone or in person.
* Please give as much notice as possible if you need to reschedule an appointment. This gives you the best opportunity to get a suitable time slot and enables us to rebook the appointment for someone who might require urgent consultation. If you are late, your appointment will still only run for the scheduled time. We reserve the right to charge a $30 non-refundable deposit for appointment bookings after the instance of non-attendance without cancelation to cover administration costs.
* Acknowledge treatment and consequent results are in part reflective of client commitment to make the changes recommended and compliance with prescribed treatment.
* Your feedback, complaints and ideas are welcomed and appreciated at All Body Holistic Health. Your feedback is helpful and provides data to improve policy, procedure and products and services at the practice.

*I authorise and consent to treatment from All Body Holistic Health and accept the terms and conditions as stated above.*

**PRINT NAME:**

**SIGNATURE: DATE:**