

QC Form for Remote Services

In order to be able to make an energetic connection to you, we use the following information. Please use black or red ink. If you are assisting someone that cannot write for themselves or create a signature, you may fill out the information for them and help them to make several marks on the page while they hold the pen or marker. You may also send a picture of the person or animal - no photocopies of pictures, it must be an original.

Full Legal Name: _____

Date of Birth: _____

City/State of Birth: _____

Signature: _____

Please include your phone number and email address so we may reach out after receiving this form.

Phone: _____

Email: _____

Do you have ANY electronic or magnetic devices implanted in your body or worn on the body? Examples: glucose monitor, insulin pump, pace maker, etc

YES NO

Print this form and mail it back to:
Well-being By Design - QR Form
1075 South Court Street
Suite 700
Medina, Ohio 44256