## AKASHIC RECORDS CONSULTATION CONSENT FORM

The Akashic Records are the past, present and future knowledge of all things. It is the recording of the Soul's journey since inception, as well as the possibilities of its unfoldment in the future. The Akashic Records are referred to in virtually every ancient spiritual teaching. It is known in the Bible as, "The Book of Life". An Akashic Records consultation consists of opening up the Records of your Soul, with your permission, and allowing the information from this profound and sacred spiritual level to come forward. The perceptions, insights and guidance you receive from this experience will be useful in resolving current life challenges. It will bring your attention and energy into the present moment, which allows you to focus your understanding toward fulfilling your life purpose. This session assists you in gaining clarity for your personal and spiritual growth for your Highest Good.

Your Akashic Records are accessed with a simple sacred prayer. I open myself to the information available from your Records and allow myself to receive and say that which comes directly to me. Because the information in the Records is so vast, it will be essential that you make a list of questions. Take time to reflect on areas of your Life in which you desire more clarity. We will work with your questions. Your openness to receive and trust determines to a large extent what happens during the session. Know that the information will be delivered with Love and Honour.

All counsel and healing given and received in this session is presented in order to assist you and will be kept confidential by me. You may choose to share this experience with others. However, know that you alone are responsible for the consequences of sharing the information and for reviewing this session in the context of your own life. You may notice the effects of this session immediately, months later or both. Being in the energy of your Records, in itself, will bring healing, whether it is conscious or not. Thank you for the honour of serving you, in this manner.

Please sign below to acknowledge that you have read and understood the contents of this Form and give your consent to have me access your Akashic Records.

Signature:		Date:
Name:		
Address:		
City:	State:	Zip/Post Code:
Phone (s) : ()		_
Email :		