

# RET Technician and Client Agreement

I, \_\_\_\_\_ (name), resident at \_\_\_\_\_  
(address) \_\_\_\_\_ (phone) agree to accept coaching from **Shelly Gilman**, certified by the Rapid Eye Technology Institute. I agree to provide all information accurately and to the best of my knowledge in order to ensure a productive and progressive client/technician relationship and experience with the Rapid Eye Technology model.

I understand that Rapid Eye Technology (RET), and **Shelly Gilman** do not diagnose or prescribe for any mental, emotional, or physical conditions, as well as symptoms or illnesses. RET is a combination of Personal Growth and Development coaching, energy tapping, and stress relief techniques. **Shelly Gilman** agrees to be my facilitator using these skills and techniques with her own personal process of awareness.

I hold harmless **Shelly Gilman** and the Rapid Eye Technology Institute and its founders, staff, and personnel for any choices or decisions I make that change my status or relationships in family, marriage, work, church, community, and with regard to the laws of society. I am completely responsible for the execution of duties, responsibilities, and agreements to all people, organizations, companies, and society in general for which I am accountable.

Payment for the first session is due at the time of the appointment. I agree to pay for each successive session at the time it is scheduled. The fee for any session that I miss without giving at least 24-hour notice is nonrefundable and future sessions will be scheduled on the receipt of the fee. Fees for an appointment that is rescheduled more than twice are nonrefundable unless other arrangements are made.

I understand my responsibilities and commitments with **Shelly Gilman** and agree to abide by the terms and conditions outlined in this contact.

Other: \_\_\_\_\_

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Technician Signature

\_\_\_\_\_  
Date