



REGISTRATION AND WAIVER

Client's name _____ Today's Date _____

Animal's name _____ Species _____

Animal's physical address _____

Client's email address _____ Phone number _____

Service(s) being requested:

_____ Health challenge _____ Transitioning/afterlife _____ Communication

_____ Behavioral issue _____ Lost animal _____ Other

Please elaborate on your concerns and list any questions you may have

Please read and sign below:

- I am of legal age, agree to the services to be performed on myself and responsible for payment of services provided by the practitioner (if applicable).
- For animal services:
 - I am the legal guardian of the animal described on this form, agree to the services to be performed and responsible for payment of services provided by the practitioner (if applicable).
 - I understand that the practitioner is not a veterinarian or animal behaviorist and any information shared during the consultation does not replace the medical care and advice provided by a licensed veterinarian or animal behaviorist.
 - I am open to animals having free will and that they cannot be compelled to behave in a certain manner or agree to share the information that they provide; they can choose to do so.
 - For lost animals, information provided is good only for a brief time, as animals can move; the search is a single consultation and is not guaranteed to result in the return of the animal.

Each member of Animal Communicators Hawaii is an independent contractor and not affiliated with Mana'o I'o LLC dba Animal Communicators Hawaii with the exception of being authorized to use the Animal Communicators Hawaii name only.

I hereby hold harmless and release Shiori Nihei Tang, an independent contractor, their associates and/or their agents, from liability connected to any services performed, or to any sharing of information, suggestions or advice given by Shiori Nihei Tang that results in injury or death of themselves, their animal or damage/loss of personal property.

Signature

Date