ROB+ KATIE TRUAX

l,	(your name), understand that I am entering
into a health coaching relationship	with Rob +Katie Truax. Any information provided me through
this coaching relationship is for info	ormational purposes only and is NOT intended as a substitute
for the advice provided by my medi	ical physician or other healthcare professional. I understand
that Rob +Katie Truax are not diag	nosing or treating a health problem or disease. They will be
providing me with information and i	nutritional support.
***Always speak with your physicia	n or other healthcare professional before taking any
medication, nutritional, herbal or ho	omeopathic supplement, or using any treatment for a health
problem. If you have or suspect that	at you have a medical problem, contact your physician or
health care provider promptly. Do r	not disregard professional medical advice or delay seeking
professional advice because of sor	nething you have read or heard from Rob + Katie Truax.
Information provided through this re	elationship and the use of any products or services related to
this coaching relationship by Rob +	- Katie Truax DOES NOT constitute a doctor-patient or
therapist - client relationship. Inform	nation and statements regarding dietary supplements have
not been evaluated by the Food an	d Drug Administration and are not intended to diagnose,
treat, cure, or prevent any disease.	I agree to purchase any recommended nutritional products
through Rob + Katie Truax only.	
Print Name:	
Signature:	

Date:_			