

## SOMA NEUROMUSCULAR INTEGRATION® APPLICATION AND CONSENT

I hereby apply for a standard series of sessions in SNI® (Soma Neuromuscular Integration®). I understand that the intent of SNI® is to improve the structure and functioning of my body, and that the work is not represented as a substitute for medical care. I understand that SNI® is specialized bodywork, performed by proficiently educated practitioners whose intention is to balance and integrate tissue and joints throughout the entire structure.

I recognize that SNI® requires that my body be touched for rebalancing integration; including specific techniques in areas such as the perineum (pelvic floor and associated structures of the gluteal cleft, coccyx and tip of coccyx, obturator attachments, pubic, pubic symphysis, and ramus), nasal passage, oral passage, nasal cavity and oropharynx. I hereby give voluntary permission to **Alexandra Goldstein** for what is reasonably necessary to facilitate the process of Soma Structural Integration.

I understand that the standard process of SNI® consists of eleven basic sessions and additional sessions as needed. I understand that neither myself nor the Soma Practitioner is under any obligation to complete the entire series.

I understand that I am responsible to wear an undergarment or shorts on my lower body and that if female, I will be provided with a tube top to cover my chest, and if male, I will be bare chested, unless I request to be covered. I also understand that I will be seen standing and walking in this attire.

I agree to be on time for all appointments and to accept financial responsibility for any missed appointments or cancellations without **24** hours notice. I understand that I could be charged a fee up to \$150 for late cancellations or no-show appointments.

I have received the Notice of Privacy Practices and have been provided an opportunity to review it.