

AWAKEN THE WISDOM WITHIN

"THE TRUTH OF YOU"
ONE-ON-ONE
SOUL LIFE COACHING

"LET LOVE IN"
GROUP COACHING SERIES

AKASHIC RECORDS
CONSULTANT

CHRIST-LIGHT
TRANSMISSIONS

FENG SHUI



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TO MY WONDERFUL CLIENTS

Release Form For Work with **Kelly S. Jones, LLC**
Including, but not limited to, Soul Coaching, Group Coaching, Akashic
Records, Christ-Light Transmissions and Feng Shui.

Agreement & Understanding Prior to Consultations & Gatherings:

Prior to commencing with the services of Kelly S. Jones, LLC, I certify that I clearly understand the following:

I understand that Kelly S. Jones, LLC is not providing medical services. I will not consider anything she says to substitute in any way for consultation, diagnosis and treatment by a licensed primary health care provider, such as an M.D., L.Ac., D.C.

Kelly S. Jones is not a licensed medical doctor or primary health care provider. She does not diagnose, prescribe, prevent or treat symptom, defect, injury or disease. The consultation/transformational process/coaching/workshop is for educational purposes only. If I want medical advice or treatment, Kelly S. Jones encourages me to consult with a licensed primary health care provider.

I consult with Kelly S. Jones in her capacity as a Spiritual Guide, Akashic Records Consultant, Christ-Light Energy Healer, and Feng Shui Consultant who conveys self-help information that individuals may use to increase their own health and well-being. I understand none of the information conveyed replaces or substitutes for the advice of a practicing medical doctor. I affirm my right to self-health and I take full responsibility for my own healing process.

I understand that which is stated above and hereby freely attend this series or program/make this appointment/ engage in any processes with Kelly S. Jones, LLC agreed by me on this date:

_____, _____, 20____ at _____
Day Month Year Time

I understand this agreement shall remain in effect for all future workshops, series, programs and consultation services engaged in with Kelly S. Jones, LLC.

Date

Signature

Thank you for your courage and willingness to participate!
May you celebrate abundant Peace, Joy, Happiness and Well-Being!

Kelly S. Jones, LLC

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“Akasha” is a Sanskrit word and means Primary Substance, that out of which all things are formed. It is the first stage of crystallization of spirit. The Akashic, or primary substance, is of exquisite fineness and is so sensitive that the slightest vibration of the ether any place in the universe registers an indelible impression upon it. The method used to access the Akashic Records is a holy prayer.

The Akashic Record is 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. Referred to in virtually every ancient spiritual teaching, it is known in the Bible as The Book of Life. An Akashic Record Consultation consists of opening up the record of one’s Soul and allowing the information from this profound spiritual level to come forward. Perceptions and insights from this deep spiritual perspective will support you in your life right now. Specifics about past lives may or may not be relevant. What is generally valuable is guidance as to how to work through patterns present in one’s current life and opportunities for growth and direction.

We will be working with the Light for the Highest Good of All Concerned. We surrender to The Divine Spirit for all direction. I open myself to the information available from your Records and allow myself to look and to say that which comes directly to me. We work with your questions, so it is important to prepare yourself by reflecting on your current life circumstances and where you would like greater clarity. Your openness determines to a large extent what happens during the session and what Spirit can bring forward.

Please remember that all counsel and healing given in the session is presented in order to assist you with your own consciousness. You may choose to share this experience with others. You are responsible for the results of their receiving the information as it is recounted or interpreted by you.

I do my best to relay what I am given to the best of my ability, presenting you with all that is conveyed to me during the Consultation in confidentiality. It will be supportive if you understand that no matter what I say, you are responsible for reviewing the session in the context of your own life. Please consider the overall impact of our moments together as we allow Spirit to move through our path. You may feel the effect immediately or after months, or both.

Please sign YOUR LEGAL NAME below to indicate that you acknowledge this letter as written and as permission to open your Akashic Records.

SIGNATURE _____ **DATE** _____

LEGAL FIRST & LAST NAME _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

TIME ZONE _____ **PHONE** _____

EMAIL ADDRESS: _____

