

Cooperation agreement

Consent for nutritional counselling

I hereby request and consent to the counseling services of dietitian Amelie Rosseneu so that I can obtain information and guidance about my diet, nutrition, and lifestyle.

- I understand that Amelie Rosseneu is a registered dietitian and does not dispense medical advice nor will she diagnose or treat any medical condition.
- I understand that if I'm under the care of a health care professional or currently use medications, I should discuss any dietary changes or potential dietary supplements use with my doctor, inform my dietitian about medical condition or medicine that might affect my diet, and should not discontinue any medication without first consulting my doctor.
- I understand that it is necessary to inform Amelie Rosseneu of any changes I make to my diet and it is my
 responsibility to report any side effects immediately. I will not hold Amelie Rosseneu responsible for any
 complications that result from my failure to comply with the previous.
- The information provided by Amelie Rosseneu is designed to meet my personal dietary needs and goals and will not be transferred, copied, or sold to another person/organization without the written permission of Amelie Rosseneu.

Personal Responsibility and Release of Health Care Related Claims:

I agree to hold Amelie Rosseneu and her company harmless for claims or damages in connection with our work together. This is a contract between myself and Amelie Rosseneu and I understand that it is also a release of potential liability. I take full responsibility for my life and wellbeing, as well as the lives and wellbeing of my family and children (where applicable), and all decisions made during and after the nutrition council sessions.

Privacy and confidentiality

I understand that Amelie Rosseneu will keep personal information and therapy notes as a record of our work together. Amelie Rosseneu will keep my information confidential, and will not share my information to any third party unless with my consent or compelled to by law.

I know that I can request to receive my file and/or ask to delete all my personal information at any time, except for the information Amelie Rosseneu is expected to keep by law (such as but not limited to payment details).

Consent for Web-Based Counselling

I understand and accept that Internet based communication platforms such as but not limited to Skype, Hangouts and WhatsApp are inherently at risk for a breach of personal information.

It is my responsibility to check the well working of the communication channel previous to my online appointment.

No-Show/Cancelation Policy

I understand that Amelie Rosseneu has a 24-hour cancellation policy, and I am aware that I will be charged 100% of the service price for a missed appointment if proper notice is not given (by whatsapp or email). This may be disregarded in the event of an emergency.

I understand this cooperation agreement and have signed it freely and willingly.

Name, date and signature client