It is a pleasure to welcome you to my program: During this food-based detox, you will not only have 5+ days to fuel your body into rejuvenation, but you will also gain tips and recipes along the way. These tools will not only allow you to recreate the detox again in the future, but also provide insight & knowledge into how you can encourage a healthier relationship to food in general. Please read the following. If anything is unclear, please ask. This Agreement is made today between the A Recipe For Wellness LLC, and the person named at the end of this document, [the Client]. The Program in which you are about to enroll will include all of the following (**BOLD indicates FULL POWER program**):

- A. One personal coaching session to review health & diet history
- B. One group session to
 - 1. review the detox guideline
 - 2. explain what to expect
 - 3. set individual goals
 - 4. answer questions
- C. GUIDELINES with detox protocol as well as post-cleanse recommendations
- D. Recipes/Shopping List/Meal Plan for all 5 days of detoxing
- E. Email support (Daily email with recipes, suggestions and tips)
- F. Group support via online forum
- G. Post-cleanse group call (or in-person session) to celebrate and review the experience
- H. Journal and tracking documents
- I. Products to encourage cleanse, eg. beverage samples
- J. Meals for 5 days (see program options below under payments)

SCHEDULING (PLEASE CIRCLE WHICH ONE YOU WILL BE PARTICIPATING IN):

January 11-15 February 1-5 March 7-11	
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PAYMENTS & REFUNDS

The cost of the FULL program is \$80/day, and includes ALL meals, including snacks. All program options listed below include the guidelines and daily support via group and personal emails, texts and phone calls as listed above. Under no circumstance will the Counselor refund any payments made by the Client. By signing this Agreement, the Client agrees to be legally obligated to pay the full amount of this Program. **Please CIRCLE which level you will be choosing.**

MEAL OPTIONS	Breakfast & Lunch	Snacks	Dinner	Cost
Basic				\$75
Basic Plus	x			\$225
Power	х	x	х	\$400

NAME SIGNATURE DATE

A RECIPE FOR WELLNESS	Maya Bradstreet	1/4/2016
CLIENT		

PLEASE LIST ANY FOOD AVERSIONS/ALLERGIES:

DISCLAIMER OF HEALTH CARE RELATED SERVICES

A Recipe For Wellness LLC encourages the Client to continue to visit and to be treated by his/her healthcare professionals, including, without limitation, a physician. The Client understands that A Recipe For Wellness LLC is not acting in the capacity of a doctor, licensed dietician-nutritionist, massage therapist, psychologist or other licensed or registered professional. Accordingly, the client understands that A Recipe For Wellness LLC is not providing health care, medical or nutrition therapy services and will not diagnose, treat or cure in any manner whatsoever, any disease, condition or other physical or mental ailment of the human body.

The Client has chosen to work with A Recipe For Wellness LLC and understands that the information received should not be seen as medical or nursing advice and is certainly not meant to take the place of your seeing licensed health professionals.

PERSONAL RESPONSIBILITY AND RELEASE OF HEALTH CARE RELATED CLAIMS

The Client acknowledges that the Client takes full responsibility for the Client's life and well-being, as well as the lives and well-being of the Client's family and children (where applicable), and all decisions made during and after this program.

The Client expressly assumes the risks of the Program, whether or not such risks were created or exacerbated by A Recipe For Wellness LLC. The Client releases A Recipe For Wellness LLC, his/her heirs, executors, administrators and assigns, its officers, directors, shareholders, employees, teachers, lecturers, agents, health counselors and staff (collectively, the Releasees) from any and all liability, damages, causes of action, allegations, suits, sums of money, claims and demands whatsoever, in law, admiralty or equity, which against the Releasees, the Client ever had, now has, or will have in the future against the Releasees, arising from the Client's past or future participation in, or otherwise with respect to, the Program, unless arising from the gross negligence of the Releasees.

CHOICE OF LAW, ARBITRATION AND LIMITED REMEDIES

This agreement shall be construed according to the laws of the State Connecticut. In the event that any provision of this Agreement is deemed unenforceable, the remaining portions of the Agreement shall be severed and remain in full force. In the event a dispute arises between the parties, either arising from this Agreement or otherwise pertaining to the relationship between the parties, the parties will submit to binding arbitration before the American Arbitration Association (Commercial Arbitration and Mediation Center for the Americas Mediation and Arbitration Rules). Any judgment on the award rendered by the arbitrator(s) may be entered in any court having jurisdiction thereof. Such arbitration shall be conducted by a single arbitrator. The sole remedy that can be awarded to the Client in the event that an award is granted in arbitration, is refund of the Program Fee. Without limiting the generality of the foregoing, no award of consequential or other damages, unless specifically set forth herein, may be granted to the Client. If the terms of this Agreement are acceptable, please sign the acceptance below. By doing so, the Client acknowledges that: (1)he/she has received a copy of this letter agreement; (2)he/she has had an opportunity to discuss the contents with A Recipe For Wellness LLC and, if desired, to have it reviewed by an attorney; and (3) the client understands, accepts and agrees to abide by the terms hereof.