

# THE CLEANSE-IN-PLACE

## COLONIC IRRIGATION CONSENT FORM

I, the undersigned, am in full agreement that colonic irrigation is not a proven method, cure, or treatment of disease or condition, nor has it been portrayed as such. Colon Irrigation is a self-administered procedure where I, as the user of the device, am solely responsible for my own actions and release the attending Technician Facility and Manufacturer from any liability regarding my health issues. The device being utilized in this facility is a gravity device – I will self-insert my own speculum and will be in full control of the procedure.

I further understand that the associates of The Cleanse-In-Place are not Medical Doctors and Do Not Diagnose, Prescribe, or Claim to cure any ailments, conditions or disease.

All results contribute to research and the utilization in future programs of Self Health Aid, while preserving my privacy, and waive any liability on behalf of the Technician serving me.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_