

Name \_\_\_\_\_ Birthday \_\_\_\_\_  
Address \_\_\_\_\_  
Email \_\_\_\_\_  
Phone \_\_\_\_\_ cell \_\_\_\_\_



I will be Happy In My Skin if I can: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I still have:

\_\_\_ Gall Bladder      \_\_\_ Thyroid

Medical conditions BHIYS should be aware of:

\_\_\_ High Blood Pressure      \_\_\_ treated      \_\_\_ not treated \_\_\_\_\_

\_\_\_ High Cholesterol      \_\_\_ treated      \_\_\_ not treated \_\_\_\_\_

\_\_\_ Diabetes Type 11      \_\_\_ Diabetes Mellitus \_\_\_\_\_

\_\_\_ Heart Disease \_\_\_\_\_

\_\_\_ Chemotherapy      Date \_\_\_\_\_

\_\_\_ Obesity Surgery      Date \_\_\_\_\_

\_\_\_ Depression      \_\_\_ treated      \_\_\_ not treated \_\_\_\_\_

\_\_\_ Eating Disorders      \_\_\_ treated      \_\_\_ not treated \_\_\_\_\_

Current Medications: \_\_\_\_\_  
\_\_\_\_\_

Prior to beginning any weight loss program, particularly if you have more than 80 lbs to lose, or if you have concerns about your health, contact your physician.

What diet or exercise programs have you tried? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Likes and dislikes of the programs: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Anything emotional or physical you would like to share? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



The Client understands that the cost of the Program is \$ \_\_\_\_\_ for six weeks. In the event of the Client's absence or withdrawal for any reason whatsoever, the Client will remain fully responsible for any unpaid balance of the Program. Under no circumstance will Counselor refund any payments made by the Client. By signing this Agreement, the Client agrees to legally obligated to pay the full amount of this Program.

Name \_\_\_\_\_ Signature \_\_\_\_\_

Date \_\_\_\_\_

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Flemington, New Jersey

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## CONFIDENTIALITY AGREEMENT

### AGREEMENT:

Be Happy On Your Skin LLC ("BHIYS") and the 6 week Living the Plan program includes participant ("Participant") support and instruction by course Instructors ("Instructor"). **Your participation in the training program is bound by the following agreement:**

1. Copyrighted Material. BHIYS, Instructors and Participant agree to respect and protect all copyrighted material provided by all parties.
2. No Guarantee of Results. Participant acknowledges and agrees that BHIYS makes no guarantee with respect to results achieved by Participant in connection with the training program, and that Participant is solely responsible for his or her own results.
3. No Liability. Participant agrees to hold BHIYS harmless from all liability arising out of or resulting from , directly or indirectly, specific advice given by BHIYS, Instructors or other Participants, and Participant shall indemnify BHIYS from and against all costs and expenses BHIYS may incur in defending against any claim or action related to such advice.
4. Confidentiality. BHIYS, Instructors and Participants agree to maintain the confidentiality of all Proprietary Information As used herein, the term "Proprietary Information" includes , without limitation, any confidential information of Participant encompassed in any reports, research or developmental work, work in progress, plans, proposals, marketing and sales information and data, financial projections, cost summaries or pricing formulas. It also includes all concepts or ideas, materials or information related to business, products or sales of Participant or Participant's licenses or customers which have not previously been released to the public at large by duly authorized representatives of Participant. BHIYS, Instructors and Participants also agree that any and all Proprietary Information shall remain the sole property of the respective owner of such Proprietary Information..

Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_