

Primal Thrival

Learn to thrive, not just survive

REGISTRATION & RELEASE FORM

CONTACT INFORMATION

*fields marked with * are optional*

Today's Date _____ Full Name _____ Client DOB _____

Preferred name _____ Legal Guardian & relation (if minor) _____

Street Address _____ City _____ State _____ Zip _____

Preferred Phone _____ Other Phone _____

May I leave a message? Yes / No May we text you? Yes / No May we email you? Yes / No

Email _____ Preferred method of communication? _____

*Religion/Spirituality _____

Emergency Contact name _____ Relation _____ contact # _____

Learning/Physical Ability Challenges _____

*Additional personal information including personal identifiers. (use the back of the page if necessary.)

THE PROCESS

Coaching sessions focus on personal growth, emotional awareness, and practical skill-building. Together we work through a collaborative, experiential process that integrates body-based awareness, guided inquiry, and supportive dialogue. The work is grounded in a somatic approach and may include techniques and principles drawn from Core Energetics, breathwork, grounding exercises, movement, nervous-system education, and reflective practices. Modalities are selected based on the needs of the individual. The overall aim is increased self regulation, clarity, and authentic self-expression.

RELEASE OF LIABILITY/LIMITS OF PRACTICE

As you start this transformational experience, I want you to be informed about the following.

- I am a Core Energetics practitioner in training with a practitioner mentor and supervisor.
- My teachings come from formal coursework, personal study, and extensive personal practice. I also have formal leadership training through the Hungarian Scouts in Exteris (KMCSSZ).
- You are aware that Alexander P. Viiberg is not a licensed mental health provider. My coaching and methods are not medical treatment, nor are they psychotherapy or counseling. They are not a substitute for psychological, psychiatric, or medical care. You are welcome to discuss the choice to seek such services with me, but the decision is entirely yours.
- This work can bring up unwanted personal feelings. For some people, sessions may evoke emotional, physical, or spiritual responses that are intense, uncomfortable, or unexpected. These reactions are a normal part of experiential work and vary greatly from person to person.
- You must be aware that movement of any form may create a certain risk of physical injury (accidents or physical strain) and/or emotional distress. You agree to personally assume this risk.
- You will be fully responsible for your participation and are free to refuse any intervention at any time.
- You understand and give consent for non-sexual therapeutic touch, which may be used as part of the work. You may withdraw this consent at any time, in any session.
- You understand there are no guarantees in this work. Emotional imbalances, life struggles, or physical conditions may or may not change or resolve as a result of our work.
- You agree to arrive sober and not under the influence of alcohol or drugs.
- Your confidentiality will be respected and maintained, except where disclosure is legally required for safety or mandated reporting.

By signing this form, you accept & agree to the above statements, & you release Alexander P. Viiberg from all legal liability, & you also voluntarily consent to participate.

Print Name _____

Signature _____

Date _____