

Kristin Lubrano Lobianco, CNT  
Kristin Lubrano Lobianco, LLC  
[krislubrano@terravitanutrition.com](mailto:krislubrano@terravitanutrition.com)  
610-800-4703

**Disclaimer**

I, \_\_\_\_\_ (client), understand that Kristin Lubrano Lobianco, CNT, (practitioner) has successfully completed the Nutrition Therapist Program at Nutrition Therapy Institute in Denver, CO, and has received her Certification in Nutrition Therapy. The scope of the therapist's consultation services does not include treatment, diagnosis or cures of specific illnesses or disorders; mental or physical. Kristin Lubrano Lobianco, CNT (practitioner) is not a physician or psychologist, and performs no medical procedures and does not prescribe medications.

I also understand that my only purpose in coming to her is to get nutritional counseling that focuses on wellness and prevention of illness through the use of natural nutritional therapies to achieve optimal health. However, while changes in lifestyle and diet can lead to better health and wellness, Kristin Lubrano Lobianco, CNT (practitioner) does not promise or guarantee protection from future illness. I will provide, to the best of my knowledge, a complete health history for the purposes of being provided the optimal plan for my individual needs.

Any foods, herbs, supplements or exercise she may suggest are intended to support my overall health and wellness. I understand that it is my responsibility to inform Kristin Lubrano Lobianco, CNT (practitioner) of any medications, herbs or supplements I am already taking to avoid contraindications or negative interactions between these and any supplements she may suggest. I understand that it is my responsibility to notify all of my attending medical doctors of any foods, herbs or supplements I choose to take as recommended by Kristin Lubrano Lobianco, CNT (practitioner).

Client's Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Client's Signature \_\_\_\_\_ Date \_\_\_\_\_

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***Fees/ Consent/ Disclosure***

**Payment Policy:** Nutrition therapy is not covered by insurance. All costs are the sole responsibility of the client. Consultations prices do not include the cost of necessary tests or nutrition supplements. All fees must be paid by cash, check or PayPal in full after the first appointment. Fees are non-refundable.

**Cancellation Policy:** A minimum of 24-hours notice is required for cancellations. Without proper notice a 50% cancellation fee will be charged.

I agree to provide payment for all nutrition counseling services and supplements provided by Kristin Lubrano Lobianco, CNT.

**Client's Signature:** \_\_\_\_\_

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

**Consent:** I request that Kristin Lubrano Lobianco prepare a nutritional analysis and personalized menu plan for me. The lifestyle and nutrition guidelines provided are suggested to me with the intent to improve my health based on my individual health goals.

**Client's Signature:** \_\_\_\_\_

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

**Practitioner's Signature** \_\_\_\_\_

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