



Ruth Total Wellness Consulting Services

FEE STRUCTURE

Quotes are provided prior to services and include a rationale for all pricing

TYPES OF QUOTES AVAILABLE

Flat
Daily
Hourly

CLIENT INFORMATION

Name	
Address	
City	
State	
ZIP Code	
Current Health Care Provider (optional)	
Current Medications	
Allergies	
Services Requested	
RUTH TOTAL WELLNESS DISCLA IMER	
The consultation provided is to provide you with information that can help you obtain better control of your illness or wellness. The information provided should not serve as a substitute for a consultation with your physician or other qualified health care provider.	

DATE:

CLIENT SIGNATURE:
(please type)