

**KINEASY INTRO COURSE SESSION SHEET**

Practitioner Name: \_\_\_\_\_ Case Study #: \_\_\_\_\_

Client Initials: \_\_\_\_\_ Age: \_\_\_\_\_ Date: \_\_\_\_\_

Physical Symptoms: \_\_\_\_\_

Emotional Stressors:

Clear	Want to Feel

**Pre-Checks:** Hydration | Central Mer. | Switching | Body Polarity | Ionisation | Thymus \_\_\_% - \_\_\_%

**Willingness statements:** Stress? Yes / No Correction: \_\_\_\_\_

**Connection Points:** Spirit | Mind | Body-Heart | Earth

**Goal/Context:** \_\_\_\_\_

\_\_\_\_\_ **Best Goal?:** Yes / No

**Stress on Goal/Context:** \_\_\_\_\_ **Suppression Mode:** I/C? Yes / No

**Age of Cause or Age of Best Understanding (circle):** Age \_\_\_\_\_

**Involvement:** Self | Male | Female | Parents | Everyone | Circumstance | Spirit | Other

**Who/What?:** \_\_\_\_\_

**Emotions:** \_\_\_\_\_

**Find a remedy and record below:**

<b>Correction Remedies:</b>	Crystal: _____ Essential Oil: _____ Flower Essence: _____ Colour: _____ Sound: _____ Oracle/Healing Card: _____
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	Wellbeing Balancing Oil: _____ Clearing Spray: _____ Affirmation: _____ ESR: _____ Other: _____
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**Recheck:** *(Tick)*

- Emotions are clear, ie. no I/C.
- Area of involvement is clear, ie. no I/C.
- Age of cause or best understanding is clear, ie. no I/C.
- Suppression mode is clear, ie. no I/C.
- Physical symptoms clear, ie. no I/C.
- Goal / context is clear, ie. no I/C on emotional stressors.
- Stress on goal has reduced. Stress level now: \_\_\_\_\_

**Home reinforcement:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Other Comments:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Participant Feedback:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Record information and 'the story' on relevance of what tested up including remedies in relation to client's physical symptoms, emotional stressors and goal/context:**

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