

Coaching Consent Form

I understand that the AZ Nutrition Center, LLC /Arizona Nutrition Center/Alexander J. Rinehart, MS, DC, CCN supports general wellness, and is not my primary health care provider, nor does he diagnose or treat disease. I will take responsibility for routine examinations that should be performed periodically such as complete physical exams, pap smears, breast examinations, mammograms, rectal examinations, prostate examination, or any other routine preventative medical examinations. I will see that these tests are done in a timely manner from my personal primary care physician.

Signature _____ Date _____

Nutritional Informed Consent

According to the Federal Food, Drug, and Cosmetic Act, as amended, Section 201 (g) (1), the term “DRUG” is defined to mean: *“Articles intended for use in the Diagnosis, Cure, Mitigation, Treatment or Prevention of disease.”*

A vitamin is not a drug, NEITHER is a Mineral, Trace Element, Amino Acid, Herb, or Homeopathic Remedy.

Although a Vitamin, a Mineral, Trace Element, Amino Acid, Herb or Homeopathic Remedy may have an effect on any disease process or symptoms, this does not mean that it can be misrepresented, or be classified as a drug by anyone.

Therefore, please be advised that any suggested nutritional advice or dietary advice is not intended as a primary treatment and/or therapy for any disease or particular bodily symptom.

Nutritional counseling, vitamin recommendations, nutritional advice, and the adjunctive schedule of nutrition is provided solely to upgrade the quality of foods in the patient’s diet in order to supply good nutrition supporting the physiological and biomechanical processes of the human body.

I have read and understand the above:

Signature _____ Date _____

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