

New England School of Homeopathy

356 Middle Street

Amherst, MA 01002

413-256-5949 fax: 800-774-8145

nesh@nesh.com

I _____ understand that my
homeopathic interview, or that of my child, _____, is
being video recorded and that it may be used in the future, strictly for educational
purposes, in the training of other homeopathic practitioners both in the classroom
setting and online.

Signature: _____

Date: _____