



HEALING LOG

Full Name (Mr/Mrs/Ms/Miss)

Date	Healing given to: (Name of client or describe situation – e.g. “2 people at healing service”)	Name & Signature of Supervising Registered Healer or Signature of Client

Pursuant to the Privacy Act 1993 this information is required to maintain a record of the healer’s healing experience and is confidential to the healer, the healer’s supervisors and Spiritualism New Zealand.