

# Hormonal Harmony

## Weight Loss & Hormonal Balance Program



## Client Agreement Sophie Simon

Jodie Studley  
Cherish Natural Health

**Contact details:**

Name \_\_\_\_\_ Date: \_\_\_\_\_

Phone: \_\_\_\_\_ DOB: \_\_\_\_\_

Email: \_\_\_\_\_ DR: \_\_\_\_\_

Address: \_\_\_\_\_

Emergency contact: \_\_\_\_\_

**Main Symptom concerns**

- |   |  |
|---|--|
| <input type="checkbox"/> Reflux                       | <input type="checkbox"/> Menopause symptoms      |
| <input type="checkbox"/> Bloating/discomfort          | <input type="checkbox"/> Poor Sleep/Stress       |
| <input type="checkbox"/> Constipation/Diarrohea       | <input type="checkbox"/> Fatigue/poor energy     |
| <input type="checkbox"/> Food intolerances/cravings   | <input type="checkbox"/> Brain Fog/concentration |
| <input type="checkbox"/> Headache/migranes            | <input type="checkbox"/> Body Pain               |
| <input type="checkbox"/> Nausea/vomiting              | <input type="checkbox"/> Fluid retention         |
| <input type="checkbox"/> Allergies/Itching/nasal drip | <input type="checkbox"/> Other _____             |
| <input type="checkbox"/> Cravings                     | <input type="checkbox"/> Other _____             |

**Top 3 Health Goals**

- |                          |       |
|--------------------------|-------|
| <input type="checkbox"/> | _____ |
|                          | _____ |
| <input type="checkbox"/> | _____ |
|                          | _____ |
| <input type="checkbox"/> | _____ |
|                          | _____ |

**Health Concerns**

- |  |  |
|--|--|
| <input type="checkbox"/> Weight management   | <input type="checkbox"/> High Cholesterol/Blood pressure |
| <input type="checkbox"/> Immunity            | <input type="checkbox"/> Cardiovascular risk             |
| <input type="checkbox"/> Autoimmune          | <input type="checkbox"/> Respiratory concerns            |
| <input type="checkbox"/> Respiratory health  | <input type="checkbox"/> Anxiety/Depression              |
| <input type="checkbox"/> Hormone Imbalance   | <input type="checkbox"/> IBS/SIBO/Coeliac/Gut health     |
| <input type="checkbox"/> Peri/Menopause      | <input type="checkbox"/> Joints/muscles/bone integrity   |
| <input type="checkbox"/> Thyroid dysfunction | <input type="checkbox"/> Medications                     |
| <input type="checkbox"/> Lymphodemia         | <input type="checkbox"/> Lifestyle concerns              |
| <input type="checkbox"/> Skin disorders      | <input type="checkbox"/> Other _____                     |

**Top 3 Health Motivators**

- |                          |       |
|--------------------------|-------|
| <input type="checkbox"/> | _____ |
|                          | _____ |
| <input type="checkbox"/> | _____ |
|                          | _____ |
| <input type="checkbox"/> | _____ |
|                          | _____ |

**Treatment interests**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Supplemental support      | <input type="checkbox"/> Functional Medicine testing | <input type="checkbox"/> Metabolic Balance Plan      |
| <input type="checkbox"/> Herbal Medicine           | <input type="checkbox"/> Meal planning/Recipes       | <input type="checkbox"/> Emotional sabotage/cravings |
| <input type="checkbox"/> Nutrition/dietary Support | <input type="checkbox"/> Food compatability Report   | <input type="checkbox"/> Health/Lifestyle Coaching   |

Other support \_\_\_\_\_



## Cherish Natural Health

Currently taking

Reason

Medications: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Supplements: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Medical Diagnosis: \_\_\_\_\_  
\_\_\_\_\_

Surgeries: \_\_\_\_\_

Family History: \_\_\_\_\_  
\_\_\_\_\_

What made you decide that now is the best time for you to make this change?

Do you think things through or do you dive straight in?

Do you have to see things to get a clear vision?

Do you like to know the big picture first and then the detail? or detail first?

How do you learn best? In order of preference do you prefer to read, listen or watch?

What additional support do you need?

**Name:** \_\_\_\_\_

**Signature** \_\_\_\_\_

**Date:** \_\_\_\_\_

Jodie Studley.  
Naturopath AD  
Complimentary Medicine Association: 2751

Metabolic Balance Practitioner  
Clinical Hypnotherapist  
NLP Health Coach

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117a Birkdale Street, Floreat, 6014

Dear Sophie

## Welcome to Hormonal Harmony: Your Weight Loss and Hormonal Balance Program

I want to CONGRATULATE you for investing in yourself and in your health in a way you may never have before.

You'll see from what's included in this program that it is designed to deliver an extremely high level of accountability, and loving support in a step-by-step process, so you make **empowered decisions** and **take bold action** toward achieving your weight loss, health and body confidence goals.

You'll also see that the Program includes a mix of private sessions in our coaching zoom room, so you can **accelerate your results** and **take back control of the direction of your health**.

### What You'll Receive In The Program:

- **Private 1:1 Intake Session with Jodie that includes your comprehensive health history and all measurements needed to create your plan** We spend an hour together to ensure we have a clear understanding of your health history, current medications, health conditions, and your goals in order to create your personalised Nutrition Plan.
- **Personalised Nutrition Plan** from Metabolic Balance provides guidelines on the foods that are optimal for your metabolism to help you burn fat, increase your energy levels and improve general wellness. The plan is generated for you based on the results of your blood test (looking at 36 different markers) and the findings from our Initial Consultation (please note this is a food-only plan, however, if appropriate supplements are specifically chosen for you, these are optional and would be in addition to your initial investment)
- **Additional private 1:1 Consultation to know the next best steps to move forward after successfully completing your 12-week program.**
- **Regular Weekly Group Coaching Sessions, delivered in our online Health Hub & Recorded.** In these group coaching sessions, we will share curated information and customised coaching exercises with the group that is GUARANTEED to accelerate your results and help you achieve major breakthroughs so you can see transformation in your body – and your life – FAST. We will cover questions about the Nutrition Plan, overcome any obstacles, and support you through each phase to ensure your success.

**Online Modules for Total Transformation.** This program doesn't exist to give you MORE information; it exists to give you CURATED information. What that means is that you can expect information that is relevant, practical, and actionable, so you are clear and confident about what to do. To ensure that this is a true and total transformation, you will have access to Online Modules that support you on your journey towards success.

- **Private Facebook Group** 'Metabolic Balance with Jodie' for weekly guidance, support and accountability. You will be invited to join the private Facebook group for additional support, inspiration, recipe ideas, and access to us in between your consultations. We will be sharing additional resources in this group so it is a highly valuable part of your success.
- Access to online food journals, symptom trackers, and diaries to help keep yourself accountable throughout the program

### BONUS

- Bonus material can be found in our online learning platform as it becomes available

**Program Dates:**

The journey begins: (this is when we all start Day 1 of your Plan).

Before this date, we need to make sure you have had your Initial Intake Session, have your Bloods done, and have your Nutrition Plan delivered via email.

The journey completes: (14 weeks of support, from when you start your plan)

**Scheduling:**

- Intake Session: This session is 60 minutes long, and can be booked via our online bookings link.
- Bloods need to be done at least 10 days before your onboarding session. We will give your pathology request form at your intake session and recommend that you go the next day to have your fasting bloods done.
- Payment must be made in full at your Initial Consultation before your plan can be created. Payment plans can be arranged.

**Cancellation Policy:**

- This program is a whole package deal – blood tests, nutrition plan, 1:1 sessions, starter pack, resources, and online group coaching. No breaking it down.
- The program fee is a one-time deal, non-refundable except when tests throw you a curveball.
- In the event of your absence or withdrawal, for any reason whatsoever, you will remain fully responsible for the entire Package fee and any unpaid balance.  
This policy exists for your benefit as well, as to obtain the best results you need to commit to the full program and all sessions.

**Investment & Refunds:****Payment Options:**

**a. Full Payment:** The investment in your Hormonal Harmony: Weight loss and Hormonal Balance Program is \$1897 in full, paid in advance. If you choose the full payment option, you are required to make a one-time payment for the entire program fee upon enrollment.

**b. Installment Payment:** You may pay a deposit of \$897.00 plus 2 payments of \$500.00.

**Installment Payment Terms:**

**a.** When selecting the installment payment option, you agree to pay for the Hormonal Harmony: Weight Loss and Hormonal Balance Program in multiple equal payments.

**b.** Installments are due on a weekly basis, unless arranged otherwise, [which means you will be billed every week from the program's start date.

**c.** The number of installments and the amount of each installment will be determined at the time of enrollment.

**Payment Method:**

**a.** Payments for your Hormonal Harmony program can be made through credit card, debit card, or any other payment method specified during the enrollment process.

**b.** You must ensure that the payment method on file has sufficient funds to cover the installment payments on their respective due dates.

I'm looking forward to supporting you towards your ultimate body confidence!

Jodie Studley

Cherish Natural Health  
0428 605247  
jodienaturopath@outlook.com.au



Cherish Natural  
Health  
BSB: 016334  
ACC: 658680719

## ADDITIONAL ITEMS (the legal bits)

### DISCLAIMER

You (sometimes referred to herein as “Client”) understand that the information received from me (sometimes referred to herein as “Coach”) in connection with the Program or otherwise should not be seen as medical advice and is certainly not meant to take the place of your seeing your doctor.

I encourage you to maintain a relationship with your primary care physician or doctor. In the event that you do not have one and/or do not have routine physicals, I encourage you to do so. Do not discontinue or change any treatment plan that you may be on as a result of our sessions without discussing the change with your doctor.

MB DISCLAIMER: Metabolic Balance Practitioners do not give medical advice nor make diagnoses. They can only provide you with advice and tips about the correct and healthy nutrition for you as an individual. All information provided by Metabolic Balance® should not be considered in any way as a substitute for medical advice, diagnoses and therapies given by a doctor, unless they come directly from a doctor! Patients should notify their practitioner of any disorder whether suspected or diagnosed. Pregnant and nursing mothers can not participate in our program. If in the event you fall pregnant during your program time you must notify us immediately for amendment to your plan. Patients with severe renal or hepatic insufficiency are also excluded from participation. Plans are also not possible for individuals with a BMI of less than 18. Also, a nutritional plan can not be created if, based on the findings collected from you, there is a suspicion of a threatening disease. (If you are under medical treatment because of your weight, if you have been advised by a doctor to take a certain diet or if you are taking medications prescribed by the doctor due to illness, you should first talk to your doctor about taking Metabolic Balance. If you suffer from or have suffered from a condition such that weight loss is undesirable, your doctor should decide if Metabolic Balance is suitable for you, in which case you should consult your doctor prior to starting)

**IN WITNESS WHEREOF,** Client and Coach agree to the terms and conditions set forth in and have duly executed this Client Commitment & Agreement effective as of the date of Coach’s signature as set forth below.

Coach name: Jodie Studley

Coach Signature:

Date: 10/02.2025



Client name: Sophie Simon

Client Signature:

Date:

