



DOCTOR SUPERVISED
CHIROTIN
WEIGHT LOSS PROGRAM

THE LOSE 20 POUNDS PROMISE

Name (Last, First): _____ Date: _____

The ChiroThin™ Weight Loss Program is a Chiropractor-supervised weight loss program that is designed to maximize weight loss by using specific combinations and blends of specific low glycemic index/anti-inflammatory foods in combination with the ChiroThin™ nutritional support formula. The program is six (6) weeks in duration. If the patient does not lose at least 20 pounds during the six (6) week program, the patient will receive one (1) additional six (6) week program at no additional charge.

In order to be eligible for The Lose 20 Pounds Promise, the patient must agree to the following terms:

Patient agrees to the following:

- I will eat every component of every meal as described.
- I will not skip any meals.
- I will take my drops as scheduled and will not miss taking them.
- I will not drink alcohol.
- I will take a daily multi vitamin and daily fiber tablets (to be approved by supervision doctor if not provided).
- I will not take any Essential Fatty Acid supplements while on the ChiroThin program.
- I will fill out my daily journal to be reviewed at the weekly sessions.
- I will drink my daily amount of recommended water.
- In order to achieve my desired goals, I agree not to quit or give up.
- I will be honest with myself and agree **NOT TO DO** things that are not in alignment with the program.

_____ (Patient Initials) _____ (Doctor Initials)

Should patient violate any of the above terms, The Lose 20 Pounds Promise is void.

Patient hereby waives any potential claim for liability against the doctor and the makers of ChiroThin™, and freely accept all liability and responsibility for patient's results while on this program.

Patient Signature: _____

Witness Signature: _____