



The Natural Cure

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AUTHORIZATION FORM

I, _____, in affixing my signature to this instrument do thereby agree to and understand the following:

1. That Reem T. Darar, PhD is a natural health counselor who is legally able to instruct and educate others in self-help methods of health such as use of proper exercise, diet, nutritional supplements, water, sunshine, fresh air, rest, and attitude;
2. That Reem T. Darar, PhD in no context of the phrase “practices medicine” and therefore does not diagnose, prescribe, treat, administer, cure, heal or otherwise perform a duty that is reserved for those who are licensed to do so;
3. That the instruction concerning a healthful lifestyle is incidental to any particular illnesses and diseases I may have and is therefore not made in direct references to these;
4. Any healing of illnesses or diseases I may experience as a result of following the instruction of Reem T. Darar, PhD, was purely the result of the body itself once a naturally correct way of living was employed, for it is only the body that heals itself, not any person;
5. That no claims or guarantees have been made as to any health benefits that may result from my following the instruction given by Reem T. Darar, PhD, concerning a naturally correct way of living;
6. That the instruction given by Reem T. Darar, PhD, in no way replaces proper medical care, and that I am free to choose a naturally right lifestyle;
7. That under penalty of perjury I am not an agent of any federal, state or local government or any agency thereof, with intent to entrap or entice Reem T. Darar, PhD, her staff, employees and/or associates into breaking any federal, state, or local law whatsoever, acting either on my behalf or on behalf of the agency of the government or on behalf of any government agency directly;

Signed _____

Date _____