

Somatic Experiencing® Training

Informed Consent and Release Agreement for Participants, Assistants and Coordinators

I, the undersigned, hereby agree to the following:

1. I am participating in the Somatic Experiencing Training (“Training”) of my own will and volition and voluntarily agree to all the terms and conditions of this Informed Consent and Release Agreement (“Agreement”).
2. I agree that all personal information of any participant relayed within the Training is strictly and completely confidential. I shall not disclose any of this confidential information to any other person or entity under any circumstances. I shall not make any audio, video, audiovisual, or other recordings of any portion of the Training nor shall I duplicate, reproduce, distribute, publish, or discuss any of the confidential information contained in or related to the Training.
3. I agree that the Foundation for Human Enrichment (“FHE”) shall not be liable or responsible for any unauthorized recording of any Training or other Somatic Experiencing or FHE event. I also agree that the FHE shall have no liability or responsibility for the use or exploitation of any unauthorized recordings. I understand that if at any time the FHE approves the recording of a Training, a separate release agreement will be provided to participants and assistants.
4. If I agree to participate in the Training as the subject of a demonstration, I am doing so voluntarily and at my own risk. I understand that the demonstration session may include questions about my personal trauma history and emotional, psychological, and physical symptoms I may be experiencing. I further understand that I am under no obligation to participate in the demonstration and that I may refuse to answer any question and that I may pause or discontinue my participation in the demonstration at any time at my discretion. FHE has no liability or responsibility for my participation or involvement in any demonstration and I accept that any result or no result may occur due to my participation or involvement.
5. I understand that the FHE is the exclusive owner or licensee of all materials utilized in the Training including, but not limited to, all printed, audio, video, digital, online, and other materials (“Materials”). The Materials also include all duplicates, reproductions, and derivatives of the Materials, as well as any materials, research, books, articles, and other works of authorship, as well as products or services, created by FHE and related to the Training (collectively, “Materials”). FHE retains all rights in and to all intellectual property utilized or referenced in the Training and the Materials including, but not limited to, the copyrights in the Materials and all associated trademarks. No Materials or any portion thereof are sold or otherwise transferred and FHE does not sell any title, ownership right, or interest in or to any of the Materials.
6. If presenting Somatic Experiencing in a public format, I must be a presenter approved by FHE, as per the guidelines posted on the FHE website, and have written approval from an FHE faculty member approved by the FHE on file.
7. In the event that FHE or its authorized representative or agent or the Training coordinator or faculty member requests that I discontinue my participation and involvement with the Training, I will immediately leave the Training and the premises upon which the Training is being held. I shall receive a full refund for any portion of the training not completed. I hereby release any and all claims against FHE related to any discontinuation of my participation or involvement in the Training.

By my signature below, I acknowledge that I have read and understand this information and agree to participate in the Training hereunder.

Signature _____ Date _____

Printed Name _____ Email Address _____

Address _____ City _____ State _____ Zip _____