



QNT Phase 1

12 Week Membership - Total \$660.00

(Due prior to first membership call)

Your Personalized Nutritional visits:

Participants' Membership follow-up visits to include:

1. 15 minutes follow up appointments via phone once a week.
2. Review and optimization of your food intake-reviewing your food journals and improving your lifestyle.
3. Updating your nutritional programs to reflect your desired health goals.
4. Managing any updates needed in your nutritional program to assist in healing.
5. Adding the appropriate supplements to your program as needed.
6. Specialized handling of cases with diabetes, high blood pressure, weight loss and parasitic cases.
7. Personalized education is based on your nutritional needs.
8. Re-analysis of your current health goals with your future health goals.
9. Recommendations as needed on how to balance Meridians / Chakras

Supplements are not included. It is encouraged to have 4 weeks' worth in hand upon starting membership.

(Print full name): _____.

Signature: _____ Date: _____.



The Quantum Nutrition Health Program is divided into three phases:

How are your symptoms affecting you? Are they negatively affecting your job, life, and family? Are your symptoms keeping you from doing certain activities since you do not feel well? How long are you going to let yourself suffer? In most cases we serve, we are their last hope. Their doctors have failed to fix the cause of their problems.

We end up as their last chance, their last hope.

This is a Team Effort!

If you genuinely want to get better, we are going to work together as a team. Do not worry, we will walk alongside you throughout the entire process.

Phase I – Quantum Nutrition Testing - 12 Week Membership

We will ask you to do 3 easy things:

1. **Make your weekly appointments** by email or phone. The appointments are around 15 minutes.
2. **Write down what you eat.** Write down your breakfast, lunch, dinners, and snacks. You can write your food down on paper, type it or even use an application on your phone/computer.
3. **Take supplements as directed by your Practitioner.** Supplements may be liquids, capsules, tablets, or Essential Oils.

What will we do during your appointments?

- Your Quantum Nutrition Testing membership plan consists of weekly appointments.
- We kindly ask you to ***allow a 10 min window around your appointment time.***
- These weekly appointments are around 15 minutes.

1. **We will discuss how the program is going.** What areas are improving? How is your energy, sleep, and mood improving? Please let us know any updates or any latest problems.
2. **We will help you with what to eat for your body.** We love food. Healthy food does **not** mean eating leaves and berries. Healthy food is finding the best quality foods that you enjoy. You will help us by writing down, typing, recording however is easiest for you... what you eat during the week. Each week you will email your food log to us. During your appointment, we will encourage you to eat the foods that are helping your health. We will also help you identify which foods are causing problems with your health. We will help you find delicious alternatives to those foods. We are not the “food police” and it is not our goal to make you feel bad about food. We are definitely not putting you on a diet either! We want to help you find foods that you find tasty and healthy.

3. **We will make special adjustments to your program.** We will increase your supplement doses, decrease your supplements, and add new supplements. Sometimes holidays, vacations, and even full moons can influence your program.

4. **We will do complete re-tests.** During **every single visit** we will make sure you are moving in the right direction regarding your health. At the mid-point of your membership, we will recheck all organs, glands, and supplements to see how you are improving. At this time, new health projects may show up such as toxic metals, chemicals, and even parasites. We will help you with the new projects and introduce your new supplements.

5. **At the end of your 3-month membership, we will do a complete re-test to see how well you are progressing.** We will Quantum Nutrition Test all areas to see their improvement, check your supplements and assess what happens next. We expect to see improvements along the way. If you are a parasite or detox case, it is unlikely that all the projects are done. We will put all the information together in a report and show you what your health was like before you started with us and where it is now.

What happens next after the membership? Phase 2: Personalized Nutritional Package

By Phase 1, most cases have had visible improvements. Increased energy, improved weight, better sleep, better mood, increased libido are common improvements we have been reported after doing a Personalized Nutrition Membership with your practitioner.

You do not have to do another membership; all the hard work is done! Instead, you can choose to keep improving in your health journey. You can choose to purchase a package of visits. Your practitioner will review with you what they recommend continuing improving your health.

This will all be in your Progress Report.

Most people graduate to work with us once per month. If you have a complicated case, your visits may be more frequent than once per month.

Phase 3: Wellness Warrior

In Phase 3, you no longer have weekly visits. Most cases will graduate in this phase to working with us once per month. Some cases are doing so well we check in with them once every 3 months.

Our goal is to help your body continue to improve in health. Sure, you can get re-exposed to parasites, heavy metals, or chemicals. We check in with you to detox any of these problems and keep you moving forward in your health naturally.

PARTICIPANT INFORMATION FORM

Please print clearly:

Name _____ Date _____

US Shipping Address _____ Apt.# _____

City _____ State _____ ZIP _____

International Shipping Address _____

Mobile Phone (_____) _____ - _____ Work Phone (_____) _____ - _____

E-mail address: _____

REFERRED BY: _____

Occupation _____ Employer _____

Date of Birth _____ Age _____ Sex: M/ F Height _____ Weight _____

Emergency Contact: _____ Phone: _____

Overall health (circle one): Excellent / Good / Fair / Poor / Other: _____.

Chief complaint (what can we help you with): (use separate sheet if more room needed) _____

Previous treatments for this complaint _____

Other complaints or problems: (use separate sheet if needed) _____

Dental History: cavities, fillings, crowns, bridges, caps, and/or root canals?

Current medications/drugs being taken: (use separate sheet if needed) _____

Are you currently under the care of a physician or other health care professionals?

(If yes, please give name and date of last visit):

Nutritional supplements you are taking: _____

Do you smoke, drink coffee or alcohol? (if yes indicate how much)

Cigarettes / Cigars / Vaping _____ Coffee / Caffeine _____ Alcohol _____

HISTORY:

List any major illnesses (with approx. dates): _____

List any surgery or operations with approx. date: _____

Past Accidents or injuries: _____

Environmental Exposures: (circle all that apply)

Mold Asbestos Pesticides Radiation Other: _____

FAMILY HISTORY:

Mom age: _____ Deceased Y N

Health Problems: _____

Dad age: _____ Deceased? Y N

Health Problems: _____

Paternal Mom age: _____ Deceased Y N

Health Problems:

Paternal Dad age: _____ Deceased Y N

Health Problems:

Maternal Mom age: _____ Deceased Y N

Health Problems:

Maternal Dad age: _____ Deceased Y N

Health Problems:

=====

Marital Status: S M D W Name of Spouse _____

Describe health of spouse: _____

Number of children if any: _____

Pregnancy History: Delivery Method: _____

Any Complications? Yes No Explain: _____

Name of Child: Age Sex Any physical conditions or concerns?

_____ _____ M / F _____

_____ _____ M / F _____

_____ _____ M / F _____

Any family history of serious illnesses (circle those which apply): Cancer /
Diabetes / Heart / Other

Any household pets or other animals you or family members are in close contact
with: _____

What can we do to make you happier? _____

SIGNED: _____ DATE _____



Re-Schedule Policy

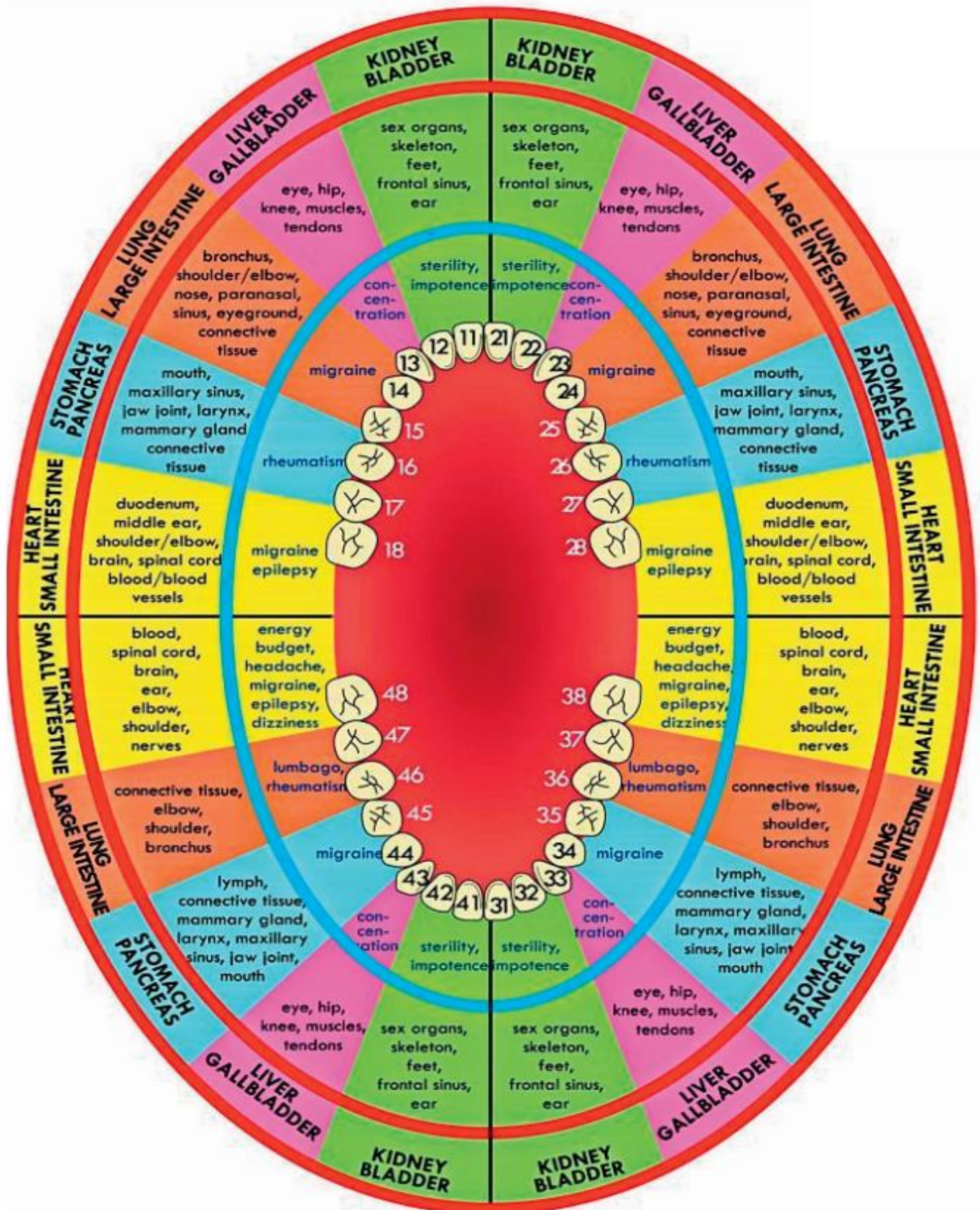
Participants can reschedule their phone follow-up appointment up to 24 hours before the scheduled time. **Even if a rescheduled appointment is pending, clients will still receive their current QNT results as usual.** This ensures they stay informed even if the appointment timing changes.

I have read and understand the Re-Schedule Policy and the automatic charge.

(Print full name.) _____.

Signature: _____.

Date: _____.



Vaccine	Product	Manufacturer (PI Date)	Growth Mediums	Listed Ingredients
Hep B Vaccine	Recombivax	Merck & Co., Inc. (2011)	yeast protein, soy peptone, dextrose, amino acids, mineral salts, potassium aluminum sulfate, amorphous aluminum hydroxyphosphate sulfate, formaldehyde	formaldehyde, yeast protein
Rotavirus Vaccine	RotaTeq	Merck & Co., Inc. (2011)	chicken fibroblasts; synthetic cell culture medium (added human albumin), polygeline (processed bovine gelatin), antibiotics), B-propiolactone, sucrose density-gradient, stabilizer solution (buffered polygeline, potassium glutamate)	polygeline (processed bovine gelatin), human serum albumin, potassium glutamate, sodium EDTA, bovine serum, chicken protein, neomycin, chlorotetracycline, amphotericin B)
DTaP Vaccine	Boostrix	GlaxoSmithKline Biologicals (2012)	modified latham medium derived from bovine casein, Fenton medium containing bovine extract, formaldehyde, Stainer-Scholte liquid medium, glutaraldehyde, aluminum hydroxide	aluminum hydroxide, sodium chloride, residual formaldehyde, polysorbate 80 (Tween 80)
Haemophilus B Vaccine	Liquid PedvaxHIB	Merck Sharp & Dohme Corp. (2010)	complex fermentation media, ethanol	amorphous aluminum hydroxyphosphate sulfate, sodium chloride
Pneumococcal Vaccine	Prevnar 13	Wyeth Pharmaceuticals Inc. (2012)	soy peptone broth, casamino acids and yeast extract-based medium, ammonium sulfate	polysorbate 80, succinate buffer, aluminum (as aluminum phosphate adjuvant)
Polio Vaccine	IPOL	Sanofi Pasteur, SA (2005)	Vero cells, Eagle MEM modified medium, newborn calf serum, M-199 (without calf serum)	Z-phenoxylethanol, formaldehyde, neomycin, streptomycin, egg protein, polysorbate 80, CTAB, formaldehyde, polymyxin B, residual calf serum, neomycin, kanamycin
Influenza Vaccine (Flu)	AgriFlu	Novartis Vaccines and Diagnostics, Inc. (2013)	chick embryo cell culture, WI-38 human diploid lung fibroblasts, Medium 199 (containing vitamins, amino acids, fetal bovine serum, SPGA (sucrose, phosphate, glutamate, recombinant human albumin), neomycin), Minimum Essential Medium (containing vitamins, amino acids, fetal bovine serum), recombinant human albumin, neomycin), sorbitol, hydrolyzed gelatin stabilizer	sorbitol, sodium phosphate, sucrose, sodium chloride, hydrolyzed gelatin, recombinant human albumin, fetal bovine serum, other buffer and media ingredients, neomycin
MMR Vaccine	M-M-R-II	Merck and Co., Inc. (2010)	human embryonic lung cell cultures, embryonic guinea pig cell cultures, WI-38 human diploid cell cultures, MRC-5 human diploid cell cultures, sucrose, phosphate, glutamate, processed gelatin, urea	sucrose, hydrolyzed gelatin, urea, sodium chloride, monosodium L-glutamate, sodium phosphate dibasic, potassium phosphate monobasic, potassium chloride, residual components of MRC-5 cells (DNA, protein), neomycin, bovine calf serum, sodium phosphate monobasic, EDTA, fetal bovine serum
Hepatitis A Vaccine	Havrix	GlaxoSmithKline Biologicals (2011)	MRC-5 cells, formaldehyde	aluminum hydroxide, amino acid supplement, polysorbate 20, formalin, neomycin sulfate, phosphate buffered saline, residual MRC-5 cellular proteins, aminoglycoside antibiotic
Adjuvant			Concern	Support
Food proteins: egg, casein, gelatin, albumin, soy, yeast, peanut			IgE stimulation	
Heavy Metals: aluminum, mercury/thimerosal, bromide			Organ & Tissue Toxicity	
Chemicals: MSG, formalin, formaldehyde, glutaraldehyde, etc.			Kidney, Ear, Nervous System	
Antibiotics: neomycin, streptomycin, kanamycin			Blood Health, Autoimmune	
Tissue Antigens: fetal DNA, blood serum, blood proteins				

Baseline Support:

These statements have not been evaluated by the Food & Drug Administration. These products are not intended to diagnose, treat, cure, or prevent any disease.

Communicable disease epidemics declined due to:

Improved Nutrition | Improved Sanitation | Improved Access to clean water | Proper childcare | Less stressful working conditions

Choose safer vaccines to lower risk for vaccine injury:

1. Select vaccines without neurotoxic, nephrotoxic or ototoxic ingredients
2. Select vaccines without heavy metals
3. Select vaccines without foods proteins
4. Select vaccines without animal or human DNA, tissue or blood serum proteins
5. Select vaccines without known carcinogens
6. When vaccine injury or vaccine adverse event reaction occurs, immediately
 - Report it to **Vaccine Adverse Event Reporting System (VAERS)**
 - Contact a **Vaccine injury lawyer**
 - Obtain a **medical exemption** for the injured child
 - Work closely with your natural health practitioner for adjuvant detox support

**Books:**

1. **Dissolving Illusions by Suzanne Humphries, MD** – A MUST READ!
2. **The Peanut Allergy Epidemic by Heather Fraser** – A MUST READ!
3. **A Shot in the Dark by Barbara Loe Fisher** – A MUST READ!
4. Vaccine Epidemic by Louis Kuo Habakus
5. Vaccine Illusion by Tetyana Obukhanych, PhD
6. Vaccines: Are They Really Safe and Effective by Neil Z. Miller
7. Vaccine Safety Manual by Neil Z. Miller
8. The Age of Autism by Dan Olmsted & Mark Blaxill
9. Evidence of Harm by David Kirby
10. How to Raise a Healthy Child in spite of your doctor, by Dr. Robert Mendelsohn MD
11. The Vaccine Guide by Dr. Randall Neustaedter
12. The Truth About Vaccines by Dr. Richard Halvorsen
13. The Vaccine Book by Dr. Robert W. Sears, MD

Documentaries:

1. **Vaxxed** – A MUST SEE DOCUMENTARY!
2. **The Truth about Vaccines** - A MUST SEE ONLINE SERIES!
3. **Vaccines Revealed** - A MUST SEE ONLINE SERIES!
4. Bought, the Movie by Jeff Hays
5. Shots in the Dark (aka Silence on Vaccines)
6. Silent Epidemic: The Untold Story of Vaccines Movie by Gary Null
7. Vaccination: The Hidden Truth – Australian Documentary exposing cause of SIDS
8. Vaccine's Safety: A Crime Against Humanity by Dr. Sherri J. Tenpenny, DO
9. Trace Amounts
10. The Greater Good
11. Deadly Immunity
12. Autism: Made in America by Gary Null
13. Autism Yesterday | Many more documentaries here: <http://vaccineliberationarmy.com>

Online Resources:

<http://www.learntherisk.org> – A MUST USE RESOURCE!
<http://www.nvic.org>
<http://www.verifyyourvaccines.com>
<http://vaccineimpact.com>
<http://www.ageofautism.com>
<http://drtenpenny.com>
<https://parentsagainstmandatoryvaccinesdotnet.wordpress.com>
<http://vaxtruth.org>
<http://vaccines.mercola.com>
<http://www.educate4theinjured.org>
<http://www.vaccineriskawareness.com>
<https://www.cogforlife.org>
<http://www.trackingvaccinations.com>

Parents sharing stories of their vaccine-injured children:

<http://thinkingmomsrevolution.com>
<http://www.mygardasilstory.com>
<http://www.nvic.org/Vaccine-Memorial.aspx>
<http://vaxtruth.org/meet-the-children>
<http://www.vaccinechoiceprayercommunity.or>
<http://parentsneedanswers.com>

**Yahogroups with like minded people:**

Vaccinations@yahoo.com
Slowandnovaxmoms@yahoo.com

Follow on Facebook:

1. Learn the Risk
2. United for Vaxxed
3. Vaccine Resistance Movement (VRM)
4. Vaccination Information Network (VINE)
5. The Refusers
6. Californians for Vaccine Choice
7. OUR KIDS OUR CHOICE
8. Dr. Bob Sears

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