Aurora Therapeutics, Inc.
Katherine Clements, N.D., L.M.T.

SHARE YOUR STORY!

You've been a Naturopathic client and you've seen firsthand how effective it can be! Help us share your story with the world! Has working with our office been a pleasant and positive experience? Has it helped you or your family and improved your life? Has Naturopathic Medicine helped resolve issues that no one else was addressing? Have our other treatments (massage/craniosacral/sauna/classes/support group) made a difference in your life? Whatever your testimonial, don't keep it to yourself!

Please use the space below to write your testimonial (please print legibly) or feel free to type it on a separate sheet of paper. When you are finished, please read and sign the release on the next page to give us permission to use your testimonial. Then simply bring in or mail us the testimonial and release form. We love to hear how we have helped improve the health, wellness and quality of life of our clients. Your testimonial could help improve the lives of others by showing how our approach has positively impacted your life.

Here are some potential topics you could discuss in your testimonial:

1. **How has Naturopathic Medicine/our office/Dr. Clements helped to improve your life?**
2. **What would you say to a friend or family member who was curious about our office and our approach?**
3. **What has pleased you most in your time at our practice?**
4. **Did you have a specific treatment or approach or experience that you wish to share?**

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Please read and sign the Patient Testimonial Release Consent form on the following page.

Thank you!