As a representative of Three In One Concepts, I agree to follow this Code of Ethics. Whether I am an (Advanced) Consultant Facilitator, (Advanced) Instructor, Advanced Trainer, Sponsor or Faculty Member, I will honor, present and demonstrate these principles in every public presentation, class and private client-session. I realize that our work aims to cultivate an understanding of individual authority and responsibility, and ability in others rather than dependence, because Three In One Concepts is based on these ethics:

RESPECT FOR INDIVIDUAL FREEDOM OF CHOICE
RESPECT FOR HUMAN DIGNITY
RESPECT FOR ETHICAL CO-OPERATION
RESPECT FOR ONE’S OWN INTEGRITY AND THE INTEGRITY OF THIS WORK
RESPECT FOR THE HIGHEST GOOD OF SELF AND THE HIGHEST GOOD OF ALL

I AFFIRM that each of us is the only valid Source for personal CHOICE. No one owns, or can choose for, anyone else.
I AFFIRM that each Instructor is free to choose to teach anywhere in the world.
I AFFIRM that as an Advanced Trainer or Faculty Member I will only teach advanced classes at Authorized Sponsors’ centers.
I UNDERSTAND and honor that Three In One Concepts does not franchise or limit in any way Facilitator’s freedom of movement or choice of Center location.
I AFFIRM that this work is educational, not therapeutic.
I UNDERSTAND and validate that we defuse Negative Emotional Stress on issues. We do not work directly with physical symptoms, nor do we diagnose or prescribe.
I TEST ETHICALLY. I do not impose my intention or beliefs on those with whom I work.

As a representative of Three In One Concepts, I will keep the ONE BRAIN® system clean, clear, and consistent.

I accept the responsibility to honor and respect the privilege of representing Three In One Concepts and I intend to share this gift ethically, from the heart, with integrity, confidentiality, dignity, respect and truth. The goal of any consultation or workshop I present is to create more communication, balance, compassion and understanding among all human beings.

Print Name

Signature ___________________________ Date ___________________________